

# BOROUGH OF EASTBOURNE.



## = Annual Report =

FOR 1908 ON THE

# HEALTH OF EASTBOURNE

Vital Statistics, Sanitary Work, etc.

W. G. WILLOUGHBY, M.D., LOND.,

M.D. Lond. in State Medicine;

M.R.C.S. Eng.; L.R.C.P. Lond;

Diplomate in Public Health of Cambridge University;

MEDICAL OFFICER OF HEALTH.

EASTBOURNE:

V. T. SUMFIELD, Printer and Lithographer, Station Street.

# SANITARY DEPARTMENT, 1908.

## SANITARY COMMITTEE, 1908-9.

Mr. Alderman ROWE, *Chairman*.

*The Mayor* (Mr. Alderman MARTIN, J.P.).

Mr. Councillor HOLLINS, *Deputy-Chairman*.

Mr. Alderman KEAY.	Mr. Councillor Fox, J.P.
„ Councillor BRADFORD.	„ „ HARDING, J.P.
„ „ BREACH.	„ „ HERRIDGE.
„ „ CORNWELL.	„ „ PRIOR.

## 1907-8.

Mr. Alderman ROWE, *Chairman*.

*The Mayor* (Mr. Alderman KEAY, J.P.).

Mr. Councillor HOLLINS, *Deputy-Chairman*.

Mr. Alderman MARTIN.	Mr. Councillor Fox, J.P.
„ Councillor BREACH.	„ „ HARDING, J.P.
„ „ CORNWELL.	„ „ HERRIDGE.
„ „ CLIMPSON.	„ „ PRIOR.

## STAFF.

*Medical Officer of Health :*

W. G. WILLOUGHBY, M.D., Lond., D.P.H.

*Assistant Medical Officer of Health :*

ALICE OBERDORFER, M.B., Ch.B. Vict.

*Sanitary Inspectors :*

E. G. SPEARS, Cert. S.I. (Cavendish, Roselands, and Redoubt Wards) (L.G.B.) (Chief).

J. H. OLLETT, Cert. S.I., R.P.C. (Meads, Devonshire, and Central Wards).

S. R. HENDERSON, Cert. S.I. (St. Mary's and Upperton Wards).

*Meteorologist :*

S. R. HENDERSON, Cert. S.I.

*Clerks :*

Messrs. W. W. BROWN and G. WALKER.

*Assistant Disinfector, etc.*

R. GAY.

# TABLE OF CONTENTS.

---

	PAGE.
1. General Account of the Borough ... ..	1
Meteorology ... ..	5
Water Supply... ..	7
Drainage ... ..	11
Population ... ..	13
Housing of Population ... ..	17
2. Marriages ... ..	19
3. Births ... ..	20
Vaccination ... ..	22
4. Infectious Diseases ... ..	23
Isolation Hospitals ... ..	38
5. Deaths ... ..	43
Comparative Death Rates ... ..	43
Ward Mortality ... ..	47
Infantile Mortality... ..	49
Deaths from Zymotic Disease ... ..	52
Cancer ... ..	57
Tuberculosis ... ..	58
6. Sanitary Work ... ..	64
House Sanitation and Certificates .. ..	66
Removal of Refuse ... ..	72
Sale of Food and Drugs, etc., etc. ... ..	74
Baths, etc. ... ..	79
7. The Factory and Workshops Acts ... ..	82

---

## APPENDIX.

---

Tables of the Local Government Board and others.

# BOROUGH OF EASTBOURNE, 1908.

---

SITUATION.—Latitude,  $50^{\circ} 46'$  N.; Longitude,  $0^{\circ} 17'$  E.

ELEVATION OF THE AREA BUILT OVER.—Varies from 140 feet above (at West end) to 4 feet below high-water mark (in the East of the Borough).

SLOPE.—From West to East. ASPECT.—South and South-East.

AREA.—Of the Borough, 5,378 Acres; of the part built over, about 2,000 acres.

DENSITY OF POPULATION.—For the Borough, 8·8 persons per acre; for the Town, about 45.

NO. OF INHABITED HOUSES.—At Census (April, 1891), 5,190; at Census of 1901, 7,088; Informal Census (October, 1907), 8,617.

POPULATION.—Census (1891), 34,960; Census (1901), 43,344; Estimated at the middle of 1908, 51,500; Local Census, Oct. 8th, 1907 (Tuesday), 50,694; Oct. 6th (Sunday), 51,345.

RATEABLE VALUE.—£423,863 10s. od.

BIRTH-RATE.—18·46 per 1,000; Males, 507; Females, 444.

DEATH-RATES.—Including all deaths, 9·90; excluding deaths of visitors, 8·8 per 1,000.

Zymotic, *i.e.*, from the seven principal Zymotic diseases, 0·69 per 1,000 (England and Wales, 1·29 per 1,000).

Infantile Mortality, 87 per 1,000 births.

MEAN ANNUAL TEMPERATURE.—50·5 degrees Fahr.

HOURS OF BRIGHT SUNSHINE RECORDED.—1,932 hours.

TOTAL RAINFALL.—25·80 inches.

To His Worship the Mayor, and to the Aldermen  
and Councillors of the Borough of Eastbourne.

---

GENTLEMEN,

In accordance with Section XIV. of the Local Government Board Order as to the duties of the Medical Officer of Health, I have the honour of submitting herewith my fifteenth Annual Report on the Health of Eastbourne, its Vital Statistics, and the work of the Sanitary Department during the year 1908.

I have also, in accordance with Section 132 of the Factory and Workshops Act, 1901, to submit a special report on the work done under the Factory and Workshops Acts. This is incorporated with the following Report under the division of Sanitary Work. The Register of Workshops, which has to be kept by the Authority, is duly kept in my department.

In accordance with instructions, copies of this Report have been sent to the Home Office, to the Local Government Board and to the County Council.

A memorandum of the Local Government Board sets forth what the Medical Officer of Health has to report upon, and I have followed the instructions of the Board.

The Report is on the lines of previous Reports so that comparison and reference may be easy. What repetition there is of matters previously detailed is necessary so that each year's Report shall be complete in itself.

Since the body of this report was written the result of an intermediate census taken in January, 1909, has been published. This gives the population as 49,286. This census was taken before all the schools re-opened, and at the worst time of the year as regards visitors. The figures have,

moreover, not yet been critically examined by representatives of the Council, and there is no reason to adopt this result in preference to that of the careful census taken in October, 1907.

The year has been one of exceptionally hard work for the Sanitary Department, as will be seen if the details of the Report are followed.

A most gratifying feature of the year 1908 has been that the death-rate was never lower since these Reports have been made. A death-rate of only 9.90 per 1,000 in a Borough of this size is most satisfactory.

In connection with equability of climate, it is satisfactory to note how few the deaths from Respiratory Diseases are in Eastbourne.

Another satisfactory condition of 1908 has been that the Infantile Mortality Rate for the year was lower than it ever has been. The Infantile Mortality in 1908 was substantially lower than the figure that has been aimed at in some districts as being as low as a borough could hope to obtain.

The unsatisfactory feature of the year was an increase in the number of cases of infectious illnesses.

The Notification of Births Act has been in force since April 1st, 1908, but the staff is not sufficient to deal very fully with this Act.

The closer correlation of the Sanitary Department with the Elementary Schools is dealt with in my report as School Medical Officer.

The adopted sections of the new Public Health Acts Amendment Act, 1907, will be in force in 1909; beyond their adoption no special work was done in 1908 in connection with them.

In the stress of work, I have been very glad to have the assistance since March of Miss Oberdorfer, M.B., Ch.B., at

times when she was not engaged in duties connected with the Medical Inspection of School Children.

The Sanitary Inspectors, Messrs. Spears, Ollett, and Henderson, have done excellent work and this cannot be adequately shewn merely by the summary tables of this Report.

The duties have been rendered lighter in the infectious disease work by the kind co-operation of members of the Medical profession, and I have to thank the Members of the Council and particularly the Members of the Sanitary Committee for their uniform kindness throughout the year.

I am, Gentlemen,

Your obedient servant,

W. G. WILLOUGHBY.





## THE BOROUGH.

THE Borough of Eastbourne, situated in Lat.  $40^{\circ} 46'$  and Long.  $0^{\circ} 17' E$ , has been formed by the union of the original civil parish of Eastbourne with that portion of the old parish of Willingdon nearest the sea and known as Norway.

The name "Eastbourne" throughout this report refers to the Municipal Borough formed as above, and the statistics apply to the Borough and not to the original parish of that name, nor to the Registration District No. 70 "Eastbourne" used in the Registrar-General's reports and which includes a wider area outside the Borough.

The total acreage of the Borough is 5,710 acres, made up of 5,362 acres of land, 16 acres of inland water and 332 acres of foreshore.

About two-thirds of the 5,710 acres in the Borough, on the north and especially on the west sides, consist of agricultural and pasture lands, and the remaining third on the south-east is built on and forms the town and faces the sea. The houses are built close to the boundaries of the Borough only in one direction, viz., along the Willingdon Road, so that the town is completely surrounded by sea or by agricultural land in all directions.

The Borough is divided into eight Wards and into nine Ecclesiastical sub-districts.

For statistical purposes the divisions of the Old Wards are still used in this report, for they are convenient for comparison with the statistics of previous years. Moreover, the areas are the most convenient for the arrangement of the work of the Sanitary Inspectors. Statistics as to the whole Borough are given therefore, and also those of the following four districts co-extensive with, and of the same names as those of, the old Wards.

The Eastern District, including Cavendish, Roselands, and Redoubt Wards.

The Central District, including the Central and Devonshire Wards.

The West District, including Meads Ward.

St. Mary's District, including St. Mary's and Upperton Wards.

The Ecclesiastical Parishes are St. Mary's, St. John's, All Saints', St. Saviour's, St. Peter's, Holy Trinity, All Souls', St. Anne's, and Christ Church. They are also very unequal in population, varying, according to the 1901 census, from 13,660 persons in Christ Church to 354 in St. Peter's.

The Meads Ward, with the exception of a small portion, consists of high class and expensive houses and schools. Devonshire Ward is much of the same character over half its extent, and the other half contains smaller residences and roads that have shops. With the exception of portions of each Ward on and near the Sea Front, the Cavendish, Central and Redoubt Wards contain mostly dwellings for the artizan class, and shops; and the Roselands Ward is entirely of this description. Upperton is a ward of residential houses, and the St. Mary's Ward, containing the Old Town of Eastbourne, consists of all classes of property. The Central and Cavendish Wards are the most densely populated, and there are no recreation grounds in them except the sea front.

The additional recreation ground at the east end of the town is being laid out. The old "Recreation Ground" has been re-drained, and is a very necessary lung for the district, surrounded as it is by small houses containing large numbers of children.

The principal institutions from a sanitary point of view are the following :—

The Borough Infectious Diseases Hospital in St. Mary's Ward.

The Isolation Cottage in the East Ward.

The Union Workhouse and Infirmary in St. Mary's Ward.

All Saints' Convalescent Home in the West Ward.

The Princess Alice Hospital in St. Mary's Ward.

Other institutions are the Upwick Vale Home, the Homœopathic Cottage Hospital, and Convalescent Home.

Just beyond the Borough boundary in the East is the Langney Hospital for Small Pox, which, although outside the Borough, belongs to the Eastbourne Sanitary Authority.

---

### **Site, Soil, etc.**

The Borough is situate on and at the foot of a slope running chiefly from the Downs on the West to the level ground at the East end of the South Downs.

The highest point of the Borough on the Downs is about 590 feet above sea level, but the elevation of the portion covered by houses varies from about 150 feet above, in the West, to 4 feet below high-water mark in the East. The Downs shelter the town from the West and South-West, the latter being the direction of most of the storms or gales. The front of the town is open to the sea facing South and South-East, and this ensures a very large amount of sunshine, as is shown by the sunshine record.

One of the most satisfactory characteristics of Eastbourne is the large extent of the Borough compared with the number of its houses and population. The large extent and number of open spaces and gardens conduce to its healthiness. The earlier estates that were laid out were excellently planned in this respect.

With the large extent of free and open sea front along the South and South-East and the Downs on the South-West and West free and open to the public, Eastbourne is well provided with open space around it.

A portion of the South Fields, which had been planned out for occupation by roads and houses, will probably be purchased and added to Gildredge Park, the whole forming a most important "lung" for the Borough as well as a place of beauty for children and others to use. Another "lung" will fortunately be preserved to the Borough, the Ornamental Gardens in Motcombe Lane having been generously given to the inhabitants.

As long as provision for permanent open spaces is made in the East as building progresses, Eastbourne will continue to be a most favoured town as regards open spaces, and this is one of the essences of skilled "town planning."

If it could be arranged, the playgrounds of the Elementary Schools should be open to children beyond the ordinary school hours as playing places, especially as the numbers of motors are so much on the increase in the streets.

Geologically there is much variation in the soil in the different parts of the Borough. Eastbourne is for the greater part on chalk, which is a very healthy sub-soil. There is a comparatively small amount of clay soil in the central part of the town, and a strip of upper greensand, which is narrow along the Grand Parade and widens as it passes from West to East to about Bourne Street, where it narrows again until it ends about half-a-mile east of the Pier. The remainder of Eastbourne in the East is on alluvium and on the beach.

Of the Wards, Meads and St. Mary's are entirely on chalk, and Upperton almost entirely so. The Central and Eastern districts are to a small extent on chalk and greensand, but mainly on alluvium and shingle, with a little clay. Valley gravel covers the chalk and greensand in the valleys.

---

### **Meteorology.**

Full details of the Meteorology of Eastbourne are given in the annual report of Mr. S. R. Henderson, who takes the readings daily. The work at Eastbourne, where readings have to be taken every day throughout the year in all weathers, at 9 a.m., 6 p.m., and 9 p.m., is decidedly heavy independently of the mathematical and clerical part of the work, but it is worth while to have Eastbourne a special Meteorological Station, and we always keep the department in accord with the wishes of the Meteorological Office in London.

As regards the instruments, which were previously scattered, with the kind consent of the Compton Estate a grouping has taken place. The instruments were originally in five places; now all but the sunshine recorder and barometer are in the triangular portion of ground outside Devonshire Park in Carlisle Road. Rain gauges and thermometers of all kinds are here; the two sunshine recorders remain by kind permission on the Grand Hotel and Pier respectively, while the barometer remains in the Shelters on the Grand Parade. The present grouping is convenient and satisfactory.

The outstanding features of the Meteorology of Eastbourne in 1908 were the small number of rain days and small rainfall, and an increased amount of sunshine.

Eastbourne's wettest time in recent years has been about the end of October, and in 1908 there was no exception.

In October, 1907, 6·1 inches of rain fell out of a total of 26·4 inches, and in 1906, at the end of October and beginning of November, 5·4 inches of rain fell within twelve days.

Following the practice of recent years, some of the meteorological data for the year 1908 have been arranged in a table in the Appendix to this Report, where a coloured chart is also given, showing in a graphic manner some of the principal meteorological items and the deaths, daily and week by week respectively.

Among the facts shown in this chart and the tables are the following :—

Rainfall for the year, 25·73 inches.

Number of days on which rain fell, 154.

Highest recorded barometric reading, 30·74 inches on February 6th, at 9 p.m.

Lowest ditto, 28·79 on December 11th, at 9 a.m.

Highest recorded temperature in the shade, 79·0 degrees on June 4th.

Lowest ditto, 17·0 degrees on December 31st.

Total amount of sunshine, 1930 hours.

Number of sunless days 53.

Mr. Henderson's complete report compares these figures with the averages. As compared with 1907 there was again a decrease of rainfall, and twenty-three less rainy days. There were eight less sunless days and 72 more hours of sunshine. Diarrhœa, the disease most closely correlated with high summer temperatures, was a little more prevalent in 1908 than in 1907, but is still kept well under the prevalence of former years.

After holding the record for two years for having most hours of sunshine of any place in England, Eastbourne in 1908, was a few hours behind the record, though close to the top.

The instruments, except for various necessary repairs, are just as in former years. Some recording wind and rain gauges would make the station more complete.

The Meteorological Station is regularly visited by Inspectors from the Meteorological Office. Monthly reports are circulated amongst members of the Committee and others, weekly reports are sent to certain papers, and daily reports are telegraphed to the Meteorological Office and to leading daily papers.

The Grand Hotel Company and the Pier Company kindly permit us to keep sunshine recorders on their premises.

The equability of the climate of Eastbourne, and the absence of intense heat in Summer, have, as usual, been markedly shewn by the comparative reports of the Meteorological Office published in the Registrar-General's quarterly returns. More important still is the evidence given by the notable smallness of the number of deaths from Respiratory diseases.

The proximity of the sea, and our peninsular position, open to the South-East, ensure the equability of climate, and while we avoid extremes of cold in winter, we do not get extremes of heat in summer. In one year recently, the difference in temperature in London and Eastbourne on the hottest day of the year in London was nineteen degrees.

Mr. Henderson's report gives full meteorological data.

---

### **Water Supply.**

There is fortunately nothing new to report in connection with the Water Supply.

The Eastbourne Public Water Supply is from deep wells and headings in the chalk. The pumping station and headings are at Friston about four miles from Eastbourne in a district very suited to the purpose.

Freedom from possibility of pollution is the great point aimed at and achieved, and not merely satisfactory analyses.

The headings are at a great depth from the surface, varying from 150 to 350 feet.

The water is pumped into distributing reservoirs in Eastbourne but is not stored in any case beyond a day or two.

The supply is constant and at full pressure all the year round, and the consumers know no difference in the supply, whether it is a year of large or of little rainfall.

The Waterworks are in the hands of a private Company, and I am indebted to Mr. A. J. Howard, the General Manager, for the information given as to quantity used, etc.

The Water Company has two subsidiary sources of supply, viz., at Holywell and at Wannock, but neither of these sources has had to be drawn upon during 1908. Friston supplied abundant water all the year round. The old Bedford Well has not been used.

For water from wells in chalk the Eastbourne water has a remarkably small hardness, viz., about  $14\frac{1}{2}$  degrees, Clark. The Eastbourne water is as soft as, or softer than, any of the London waters, whether derived from rivers or wells.

Analyses of the water have been made constantly, with special full reports once monthly at least, both by Professor Frankland and Mr. Wynter Blyth, the Borough Analyst; partial analyses have been made weekly. These are, of course, important, but reliance is placed chiefly in keeping the sources unimpeachable. An example of the monthly report is attached.

For ordinary domestic purposes there is no need for any artificial softening of the Eastbourne water.

The amount of water pumped into Eastbourne for consumption from the various sources varied from 11 million gallons per week to 16 million gallons per week, the average amount being about 13 million gallons per week. This,

allowing for houses supplied in outlying districts, gives about  $31\frac{1}{2}$  gallons per head per day for all purposes, and more could have been pumped in if necessary.

Former reports compared with this will show that the quantity and quality of the water remain practically the same year by year. It is very satisfactory to have a source so comparatively independent of variations in the amount of rainfall.

I submit the report of a typical analysis of Eastbourne water, the samples being taken in the summer and reported on by Professor Frankland. Mr. Wynter Blyth's (Borough Analyst) reports give similar results.

It will be noticed that reports on both series of mains, high and low service, and on the well itself are included.

There are no nitrites in the water and no trace of any poisonous metal.

CHEMICAL LABORATORIES,  
THE UNIVERSITY,  
BIRMINGHAM,

*January 30th, 1909.*

DEAR SIR,

Herewith I enclose a tabular statement of the results obtained in the chemical analysis of the several samples of water sent to me from Eastbourne on the 15th inst.

The samples from the high and low service mains were almost quite clear, they were palatable, of an extremely high degree of organic purity, as well as of only moderate hardness. Thus the water distributed in the town was of most excellent quality for drinking and domestic purposes generally.

The sample from the Friston Well contained practically the same proportion of chlorides and nitrates as were present in the water of the service mains.

I am, faithfully yours,  
PERCY F. FRANKLAND.

## RESULTS OF ANALYSIS EXPRESSED IN PARTS PER 100,000.

Description.	Total Solid Matters.	Organic Carbon.	Organic Nitrogen.	Ammonia.	Nitrogen as Nitrates and Nitrites.	Total com- bined Nitrogen.	Chlorine.	Hardness.		
								Tem- porary.	Per- manent.	Total.
High Service Main, Nov. 15, 1908 ...	27.52	.028	.006	0	.303	.309	3.45	15.3	3.6	18.9
Low Service Main, Nov. 15, 1908 ...	27.60	.033	.005	0	.309	.314	3.45	15.0	3.6	18.6
Friston ...	—	—	—	—	.296	—	3.40	—	—	—

(Signed) PERCY F. FRANKLAND, Ph. D., M.Sc., LL.D., F.R.S.

*Jan. 30th, 1909.*

## **Sewerage and Drainage.**

All matters pertaining to sewers are in the Department of the Borough Engineer. The sewerage of Eastbourne, owing to the rapid growth of the Borough, requires continual attention, and the time having come again for an extension or enlargement of the system, the Borough Engineer has submitted a comprehensive scheme to the Council. The part of the Borough chiefly concerned is the North-Eastern portion near Seaside and Whitley Road, and it will be conducive to improvement in the public health of that district if the work is put in hand soon. The sewerage conditions in the other districts are apparently satisfactory. Surface road level ventilation of sewers through grids has been for some time now quite abandoned, with great advantage as regards nuisances. High upcast shafts are provided, so that there is no air pressure in the sewers. The system of intercepting traps between the house drains and the sewers is practically universal in Eastbourne, as is, of course, the water carriage system. The few exceptions are in buildings connected with agriculture in the outlying districts.

The whole of the sewage, except that from the Infectious Diseases Hospital and some surface water, passes into the sea untreated at Langney Point, some distance to the East of the Borough in Pevensey Bay. Owing to the levels of a portion of the Borough, the fall is only natural at low tide; at high tide some of the sewage has to be lifted by the aid of Shone's Pneumatic Ejectors.

In two parts of the town the sewage has to be raised to the level of the main sewers by pneumatic ejectors—viz., in Compton Street and in Bourne Street. The system works very well.

There are one or two outfalls on the sea front for storm water.

Infectious excrementitious matter at the Infectious Diseases Hospital is destroyed by cremation, and as there

are but very few cases except those in the Hospital, fouling of the shore in the neighbourhood of the outfall, if it occurred, would not easily convey specific infectious illnesses, if at all.

House drainage work during the year is detailed in the later part of this report dealing with the work of the Sanitary Inspectors. The house drainage receives constant attention, and the conditions in this respect in Eastbourne are highly satisfactory.

---

### **House Refuse.**

House and garden refuse is collected over the whole of the Borough by the Corporation, and is then burnt at the Destructor.

This is the only way in which to deal satisfactorily from a health point of view with our refuse. There is no difficulty as regards house refuse, but during 1908 questions have arisen concerning two varieties of offensive refuse. The first—fish offal—is particularly offensive when stale, and is removed daily from fishmongers shops at a charge hitherto about 50 % of the cost of removal. This charge has been somewhat increased, but the position of the fishmongers is such that it is likely there will be no decrease in the efficiency of the removal. In the second case, viz., that of garden refuse, the position is different—if a charge were made for its removal there would be most likely a repetition of the unfortunate conditions of some years ago, before garden refuse was removed by the Corporation. Then we had constant nuisances in these ways:—the refuse either (i.) accumulated and decomposed; (ii.) was burnt on the spot, causing a disgusting smell over the neighbourhood; or (iii.) was thrown into back lanes to accumulate, decompose, and become a nuisance. There were, moreover, attempts to sort refuse after being put into the dustbin—an unhealthy and uncleanly thing, apart from the irritation and attempts at bribery it lead to.

In the interest of health and convenience the continuance of the present system is very important.

Gardens in Eastbourne are so universal and of such general advantage to the town as a whole, that the small saving that would be effected in the cost of collection and destruction would not be worth the nuisance, danger, and irritation. The owners of gardens are rated accordingly, and so they do at present pay their portion.

Certain improvements are to be shortly put in hand at the Destructor, which would enable a more suitable type of cart to be used.

The year 1906 was the first complete year in which the whole of the district was scavenged by the Corporation, with a great improvement in efficiency. Until 1906 a Contractor had the removal of refuse over a part of the East of the Borough. Collection of Refuse takes place once weekly during nine months of the year, and twice weekly in July, August and September, from all houses whether large or small; this has gone on now since and including the year 1899.

---

### **Population.**

The local interest as to the number of the population of Eastbourne is evident from the fact that twice an extra census has been taken since the general census of 1901, in connection with the proposed alteration of Eastbourne from a Municipal to a County Borough. A census was taken on the 8th October, 1907, and showed the population then to be 50,696, on the previous Sunday there were 653 more, and this number practically agreed with the estimate that had been formed as to the population.

The accuracy of this census having been questioned, and there being apparently a wish to obtain a small return rather than an average population, a second extra census was taken on January 24th, 1909, probably almost the worst time of the

year at which the census could be taken in Eastbourne. January is a very dull time as regards visitors, and on the 24th the whole of the schools had not yet re-opened. The numbers taken at this census have not yet been published.

The usual method of calculating a population, namely, by assuming that it increases in proportion as it did in previous inter-censal years, gives divers results as far as the population of Eastbourne is concerned, for if the population had continued to increase as it did during the years 1881-1891, the population would now be over 56,000, but if it only increased as it did during the years 1891-1901, the population would have been 50,654 in the middle of 1908.

It is probable, as shown by the 1907 census, that something intermediate has been the case in Eastbourne in the last few years, and in this report, for calculations as to death-rates, etc., the population has been taken as being 51,500. If these figures are obtained in such a month as October, it is obvious that the average population is greater than this during the increases at Christmas, Easter, and above all during the summer months.

A total of approximately 1,530 certificates have been issued for occupation of new houses since the census of 1901; the census of 1907 shewed the average number of persons per house to be 5.88. Allowing for the usual percentage of empty houses this apparently shews an increase of 8,555 persons since the 1901 census, or a total population at the end of 1908 of 51,900 persons.

The distribution of the population according to Wards is shown in the following table. In the third column the estimate as to the additional population since the census is obtained partly by calculations from the number of houses built and occupied in each Ward since the census year.

New Wards.	Old Wards.	Population in 1891 (Census).	Population in 1901 (Census).	Approximate Population in 1908 (Estimate).
Roselands Cavendish Redoubt	East	... 12113	... 16836	... 20828
Central Devonshire				
Meads	West	... 5736*	... 6101	... 6762
St. Mary's Upperton	St. Mary's...	6619*	... 10752	... 13883
Totals		... 34969	43344	51500

\*Some of the St. Mary's Ward population was at this census included with the West.

### SEX CONSTITUTION OF THE POPULATION.

The last official census showed that the percentage of males is now nearly stationary, and not decreasing at the rapid rate the previous census showed :—

Year.	Males, Total.	Per- centage.	Females, Total.	Per- centage.	Total.	Excess of Females.
1881 (census)	10,060	45'7	11,954	54'3	22,014	1,894
1891 (census)	14,665	41'9	20,304	58'1	34,969	5,639
1901 (census)	18,097	41'8	25,247	58'2	43,344	7,150
1908 (estimate)	21,478	41'7	30,022	58'3	51,500	8,544

Calculated to the middle of 1908 there are probably 8544 more females than males in Eastbourne, due partly to there being fewer occupations and means of obtaining livelihood for men in Eastbourne in proportion to women.

In Eastbourne males preponderate at ages 1 to 14, and at ages below 1 and above 14 females preponderate. After the age of 50 there is not much difference, the greatest excess

being at the ages 20 to 30, when the females are nearly twice as numerous as the males.

#### AGE CONSTITUTION OF EASTBOURNE POPULATION.

The following table gives the 1901 (census) and 1908 (middle, estimated) age groups of the population according to sexes :—

Age Groups.	Census, 1901.			Estimate, 1908.		
	Males.	Females	Total.	Males.	Females	Total.
0—1 ... ..	392	406	798	465	483	948
1—5 ... ..	1537	1502	3039	1824	1787	3611
Total under 5 ... ..	1929	1908	3837	2289	2270	4559
5—15 ... ..	4383	4100	8483	5205	4870	10075
15—25 ... ..	3533	6114	9647	4192	7271	11463
25—65 ... ..	7434	11906	19340	8820	14160	22980
65 and upwards ...	818	1219	2037	972	1451	2423
Totals ... ..	18097	25247	43344	21478	30022	51500

Of late years there has been a gradual change in the age constitution of the population of Eastbourne in that there are proportionately more persons of ages 25 to 65 and less from 1 to 15, amounting in ten years to about three per cent.

The percentage composition of the population of Eastbourne at different groups of age is given in the following table :—

Age Groups.	Census, 1891.	Census, 1901.		
	Total.	Total.	Males.	Females.
Under 5 years of age ... ..	10'02	8'85	10'66	7'56
5—15 ... ..	21'19	19'57	24'22	16'24
15—25 ... ..	22'90	22'26	19'52	24'21
25—65 ... ..	41'65	44'62	41'08	47'16
65 and upwards ... ..	4'24	4'70	4'52	4'83

At the census of 1901 it was found that of 10,709 occupied males over 10, 2,441 were engaged in the building and allied trades. Of 8,843 occupied females, 3,771 were in domestic service. These are the two staple occupations for males and females respectively in Eastbourne.

#### HOUSING OF THE POPULATION.

The following table shows the number of dwelling houses in Eastbourne and in each Ward at the census of 1891 and 1901, also the number of persons per house and the number of dwelling-houses recently certified:—

Wards.	Houses inhabited at Census, 1901.	Persons per house. Census, 1901.	Houses certified. in 1908.	Houses certified from Census to end of 1908.
East ...	2,970	5'6	35	769
Central ...	1,555	6'2	3	65
West ...	643	9'4	8	117
St. Mary's	1,920	5'6	59	578
	<u>7,088</u>	<u>6'1</u>	<u>105</u>	<u>1529</u>

In 1908 certificates were issued for 105 new houses, as against 127 in 1907 and 163 in 1906.

The persons per house have been as follows:—

1891 census—6'7.

1901 census—6'1.

1907 census—5'88.

This points to a decrease of over-crowding, but also to the fact that a smaller class of house has been built, on the whole, of late years.

Between the two census years of 1891 and 1901 there was a reduction in the number of persons per house in each district except in the West or Meads Ward.

Over-crowding is of very small extent in Eastbourne, though the rents are such that many householders find it necessary to have lodgers.

The population density in 1908 was approximately 8·8 persons per acre for the whole Borough; for the town, *i.e.*, the part built over, it was approximately 40 to 45 persons per acre.

This latter density has to be the one taken chiefly into account, and it is a small one and an important factor in the health of the community. That the Borough is surrounded by sea and open lands and intersected by parks and large gardens is of inestimable advantage to its healthiness. The older building areas on the estates were splendidly laid out in this respect.

The building sites in St. Mary's, where much of the building is going on, are very healthy, being on good chalk and at a good elevation. The same remark applies to the West District. The sites in parts of the East are on marshy ground and at too low a level, and the Bye-law, keeping up the level of site of new houses there, is very necessary. In the Central District, building of new houses is practically at an end, as there are no more sites.

### MARRIAGES.

The number of marriages recorded in the Borough during 1908 was 350, equal to a rate of 13·7 per 1,000 persons living.

The following table gives rates in previous years in Eastbourne and compares them with England and Wales :—

Year.	No. of Marriages.	Rate per 1,000 living.	Rate for England and Wales.
1898    ...    ...	291	14·20	16·2
1899    ...    ...	298	14·28	16·5
1900    ...    ...	255	12·00	16·0
1901    ...    ...	341	15·67	15·9
1902    ...    ...	325	14·68	15·9
1903    ...    ...	312	13·87	15·6
1904    ...    ...	271	11·84	15·2
1905    ...    ...	273	11·87	15·3
1906    ...    ...	327	13·34	15·6
1907    ...    ...	348	13·78	15·8
10 years' average.	304	13·34	15·8
1908    ...    ...	350	13·59	—

The marriage rate is thus at about the ten years' average.

## BIRTHS.

The births registered during 1908 numbered 951, and comprised those of 507 males and 444 females.

The births occurred in the succeeding quarters of the year as follows :—256, 252, 234, 209.

The following table shows the steady diminution in the Eastbourne birth-rate ; the birth-rate for England and Wales is also diminishing year by year :—

Years.	No. of Births.	Eastbourne, Birth-rate per 1,000 living.	England & Wales, Birth-rate per 1,000 living.
1898    ...    ...	934	22·78	29·3
1899    ...    ...	936	22·42	29·1
1900    ...    ...	892	20·99	28·7
1901    ...    ...	907	20·85	28·5
1902    ...    ...	907	20·49	28·5
1903    ...    ...	900	20·00	28·4
1904    ...    ...	963	21·05	27·9
1905    ...    ...	853	18·34	27·2
1906    ...    ...	892	18·24	27·0
1907    ...    ...	871	17·25	26·3
10 years' average.	895·5	20·24	28·1
1908    ...    ...	951	18·46	26·5

In 1908 there was no further drop in the birth-rate.

The diminution in the birth-rate goes on in Eastbourne as elsewhere. The cause is well known. Unfortunately, the diminution in rate is due to cessation of child birth among those able to properly feed and bring up their children.

The rate for England and Wales in 1908 was 1·6 per 1,000 below the average for the preceding ten years.

Of the total number of births registered 45 were illegitimate, or at the rate of 42 per 1,000 births. The ten years' average rate had been about the same.

The death-rate of illegitimate children for the year was one in every five born.

The average proportion of illegitimate to legitimate births in recent years throughout England and Wales up to 1906 was 40 to each 1,000 births.

The births and birth-rates per 1,000 per annum for the various Wards in 1908 were as follows:—

		Births.		Rate per 1,000.
East Ward ...	...	585	...	28·8
Central ...	...	110	...	10·9
West ...	...	29	...	4·2
St. Mary's ...	...	227	...	16·3
		<hr/>		<hr/>
The Borough ...		951	...	18·46
		<hr/>		<hr/>

In the East Ward there were 352 more births than deaths.

„ Central	„	15	„	„
„ St. Mary's	„	104	„	„
„ West	„	3 less births	„	„

For the first time for some years the total number of births has been above the average.

The return as to Vaccination on the next page has been kindly supplied by Mr. Hodges, the Vaccination Officer for Eastbourne and Seaford.

# VACCINATION RETURN FOR EASTBOURNE DISTRICT, including Local Government Returns due on or before February, 1909.

E. J. HODGES, *Vaccination Officer.*

Year.	Births.	Successful Certificates Registered.	Certificates of Insuscep- tibility Registered.	Had Small Pox.	Certificates of Exemption Registered.	Deaths under one year old.	Postponed by Medical Certificate.	Removed out of town and gone, no address.	Cases of Prose- cution under Sec. 31.	Unaccounted for.	Total number of Certificates of Success- ful Primary Vaccinations at all ages received during each of last 11 years.
* <sub>1</sub>		* <sub>3</sub>	* <sub>4</sub>	* <sub>5</sub>	* <sub>6</sub>	* <sub>7</sub>	* <sub>8</sub>	* <sub>9</sub> & 10.		* <sub>11</sub>	* <sub>12</sub>
1894	1013	228	—	—	77	94	—	51	—	563	—
1895	978	207	—	—	102	108	—	52	—	513	—
1896	1017	224	1	—	82	108	—	21	—	581	—
1897	985	194	—	—	102	103	1	42	—	543	—
1898	1024	207	—	—	122	137	1	86	8	463	116
1899	1050	313	3	—	111	115	2	100	15	391	228
1900	999	312	—	—	249	93	40	122	8	175	351
1901	999	312	—	—	351	101	28	108	20	79	491
1902	997	303	2	—	326	81	56	82	5	152	712
1903	1000	296	—	—	343	71	33	106	—	151	355
1904	1051	282	2	—	372	75	44	98	—	178	306
1905	957	308	1	—	377	77	38	84	—	72	392
1906	995	275	—	—	359	73	31	67	—	190	280
1907	985	227	1	—	377	76	11	98	—	195	289
Jan. to June 1908	547	113	1	—	245	28	8	42	—	110	288

The number of certificates of conscientious objection actually received by Vaccination Officer irrespective of the dates of birth of the children to which they relate, during the year 1908 was 478.

The numbers marked thus (\*) refer to columns in official Returns to Local Government Board.

## INFECTIOUS DISEASES.

In connection with the existence of Infectious Illness and dealing with the same, the Council has adopted all the adoptive Acts on the subject as early as they have been available.

The Infectious Diseases Notification Act, 1889; the Infectious Diseases Prevention Act, 1890; the Public Health Act Amendment Act, 1890; and the useful clauses of the Public Health Act, 1907; were all adopted as soon as possible after they were passed. There are also certain clauses in the Eastbourne Improvement Acts that concern Infectious Illness.

### NOTIFICATION.

Voluntary Notification of Pulmonary and Laryngeal Tuberculosis or Consumption has been in operation in Eastbourne for six-and-a-half years.

The other diseases notified are those now compulsorily notified in accordance with the former Voluntary Act of 1889.

In 1902 Varicella was added for a time only as a precaution against the spread of Small Pox through mild cases akin to Chicken Pox in appearance.

Measles, Whooping Cough and Diarrhœa, the three most fatal diseases of early childhood, are not notifiable, and while no provision is made for isolation of these cases, notification is of doubtful advantage. If isolation were provided much could be done for the sufferers, but the infection, especially of the first two, is at its height so early and often before diagnosis, that these diseases spread before the first cases are noticed.

In addition to the legal notifications much information is obtained from the School Attendance Officers and the Head Teachers of Schools, especially as to outbreaks of diseases, cases of which have not legally to be notified.

## NOTIFICATIONS.

During 1908 there were 442 cases of infectious illness notified, exclusive of Tuberculosis. This represents a sickness rate as regards the diseases scheduled of 8·5 per 1,000 of the population. In the previous year the notifications were 218 and the rate 4·3. The main increase was in the number of cases of Diphtheria, bringing the total numbers well above the average.

The highest sickness-rate was in 1890, when it was 16·53 per 1,000; the lowest in 1903, when it was 2·62 per 1,000.

The subjoined table shows the rates for the past ten years and the average rate :—

Year.	Total number of cases notified.	Sickness-rate per 1,000 of population.
1898... ..	142	3·46
1899... ..	157	3·76
1900... ..	148	3·48
1901... ..	206	4·74
1902... ..	197	4·45
1903... ..	118	2·62
1904... ..	137	2·99
1905... ..	142	3·05
1906... ..	208	4·24
1907... ..	218	4·31
Average for 10 years.	167·7	3·72
1908... ..	442	8·58

A complete table, giving details of the various diseases notified from January, 1904, to December, 1908, divided and sub-divided according to years and quarters, is given in the Appendix.

As regards the occurrence of Notifiable Diseases in Eastbourne, a table in the Appendix shows the notifications week by week. The greatest number in any one week was 19 in the week ending December 12th, 1908.

The cases occurred in the succeeding quarters as follows :—

1st Quarter	...	...	...	101
2nd	,,	...	...	82
3rd	,,	...	...	87
4th	,,	...	...	172

As usual, there was a large proportion in the last quarter, especially as regards Diphtheria.

The distribution of the notified cases according to Districts, and the sickness-rate per 1,000 for each District for 1908, are shown in the following table :—

Disease.	Districts.				The Borough.
	East.	Central.	West.	St. Mary's.	
Scarlet Fever ...	90	11	4	43	148
Diphtheria ...	185	25	9	39	258
Enteric Fever ...	1	2	3	1	7
Erysipelas ...	18	3	2	5	28
Puerperal Fever ...	—	1	—	—	1
Total ...	294	42	18	88	442
Sickness-rate ...	14·1	4·1	2·6	6·3	8·5

The East District was the principal sufferer both absolutely and relatively. The notes on Diphtheria later on shew that the disease originated and principally continued in a small portion of this District.

The sickness-rate per 1,000 for each District for the past 10 years is shewn in the subjoined table :—

Sickness-rate per 1,000.	East.	Central.	West.	St. Mary's.
1908 ... ..	14·1	4·1	2·6	6·3
1907 ... ..	5·3	2·6	3·4	4·5
1906 ... ..	5·8	4·3	0·8	3·5
1905 ... ..	4·8	2·2	1·1	2·0
1904 ... ..	4·3	1·2	2·2	2·8
1903 ... ..	3·0	2·1	2·6	2·4
1902 ... ..	4·3	3·8	4·5	5·2
1901 ... ..	4·1	2·3	2·2	10·6
1900 ... ..	2·7	2·5	2·3	4·5
1899 ... ..	3·3	3·4	1·7	4·3
1898 ... ..	3·4	1·7	0·8	5·9

#### NOTIFICATIONS—AGE INCIDENCE.

The subjoined table shows that, as usual, the age group 5-15 suffers most in these diseases :—

Disease.	Total	0-1	1-5	5-15	15-25	25-65	65 and upwards.
Scarlet Fever ...	148	1	32	91	17	7	—
Diphtheria ...	258	—	60	175	13	10	—
Enteric Fever ...	7	—	—	3	1	3	—
Erysipelas ...	28	—	—	5	—	13	10
Puerperal Fever.	1	—	—	—	—	1	—
Totals ...	442	1	92	274	31	34	10

The later in life the less chance of a child's getting the commoner diseases, viz., Scarlet Fever and Diphtheria, and the better chance of getting over it.

## NOTIFICATIONS—SEX INCIDENCE.

Disease.	Males.	Females.	Totals.
Scarlet Fever ... ..	56	92	148
Diphtheria ... ..	107	151	258
Enteric Fever ... ..	4	3	7
Erysipelas ... ..	6	22	28
Puerperal Fever ... ..	—	1	1
Totals ... ..	173	269	442

It is usual for females to be in excess except in cases of Enteric Fever.

Some of the cases were imported or due to imported cases, as shewn later on, under each disease dealt with. This is usual in health resorts.

## HOUSE DISTRIBUTION.

The 258 Diphtheria cases occurred in 220 houses, thus :

In 190 houses in each house 1 case	...	190
In 23 „ „ 2 cases	...	46
In 6 „ „ 3 „	...	18
In 1 „ „ 4 „	...	4
—		—
220		258
—		—

The 148 Scarlet Fever cases occurred in 111 houses, thus :—

In 85 houses in each house 1 case	...	85
In 19 „ „ 2 cases	...	38
In 5 „ „ 3 „	...	15
In 2 „ „ 5 „	...	10
—		—
111		148
—		—

In nine houses Scarlet Fever and Diphtheria each occurred; in six instances at separate times, and in three instances at about the same time.

#### SMALL POX.

No Small Pox has occurred in Eastbourne since 1902, when there were two cases.

#### SCARLET FEVER.

One hundred and forty-eight cases of Scarlet Fever were notified during 1908. All but one were isolated in the Borough Hospitals.

All the patients recovered. The death-rate was therefore *nil*. The death-rate for England and Wales in 1908 was 0·08 per 1,000.

The occurrence of Scarlet Fever was principally in November and December. The months in which there were fewest cases were August, February and September. This is much in accordance with experience in other years.

There were 14 more cases in 1908 than in 1907, and the constant removal of cases to Hospital prevented a larger number from occurring. In 1906 exactly the same number of cases occurred, but the number is 56 above the previous five years average. It was, as usual, a frequent experience to find overlooked cases causing others.

The disease is often so mild that cases are easily overlooked, it not being considered necessary to call in a medical man, and then secondary cases occur.

School Influence:—No particular school was affected, and so none had to be closed.

During November when most cases occurred, viz., 26, six of the patients were either above or below school age, three were attending two private schools, and the remaining 18 attended eight different elementary schools. Similar statistics apply to cases occurring in the other months of the year.

The cases were scattered throughout the Borough, and there was no evidence of any milk epidemic.

Various cases were imported or due to importations, but it was not possible to trace many of the cases. Importations and mild unnoticed cases are responsible for keeping up the supply of Scarlet Fever.

Return Cases :—I am dealing at length with return cases under "Diphtheria" later on. In 1908 one instance occurred of a case being notified four days after the return of a patient from Hospital (Sutton). There were two instances of 10 days' interval and one of 13 days. The longest interval in the total of 11 secondary cases from the same house was 77 days.

In one instance a secondary case was notified two days *before* the return home of the cured patient. Had it been two or more days later this would have been called a "return" case. Coincidences such as this must account for some of the so-called return cases.

In previous reports I have gone fully into the advantages of having a Scarlet Fever Hospital, and the recovery of every patient in 1908 is an important and satisfactory testimonial to its use. It is exceedingly rare for a death from Scarlet Fever to occur at the Hospital.

#### DIPHTHERIA.

I regret to have to record an increase in the number of cases of Diphtheria and in their severity in 1908.

The numbers have been as follows in late years :—

1890	...	495	1899	...	47
1891	...	184	1900	...	50
1892	...	59	1901	...	55
1893	...	58	1902	...	51
1894	...	40	1903	...	44
1895	...	36	1904	...	38
1896	...	42	1905	...	31
1897	...	177	1906	...	19
1898	...	42	1907	...	54
1908	...	258			

In the old days about 1890 the disease was very prevalent and the deaths in that year were 59. In spite of the increase of population from under 35,000 to 51,800 not only were the numbers of cases less in 1908 but the deaths numbered only 14 as against 59 in 1890.

Nevertheless, the large number of cases was very disappointing after the gradual reduction of the number of cases annually down to 19.

Other places along the coast are somewhat similarly suffering.

The origin of the outbreak appears to have been in the district where Whitley Road joins Firle Road. Nearly the whole of the inmates of a house here became attacked after the occurrence of an unnotified case that proved fatal. For some time succeeding cases could be traced, or partially traced, directly or indirectly to connection with this house or its inmates, and then cases became more general in the locality and could not often be traced. Sporadic cases throughout the Borough followed.

Of the 258 cases, 185 occurred in the Eastern District and mainly in the area bounded by Whitley Road on the North-East, the Railway on the North-West, Bourne Street on the West, and Seaside on the South. The street list shews this well. Although Diphtheria spreads by a specific germ from person to person, and hence the sporadic cases about the town, there is some influence about the district defined above which helps to spread the disease to some degree in that area.

Among the peculiarities of the houses in that area is that they are built on a low-lying marshy soil, are modern, and are in many instances occupied by some of the poorest people in the Borough, although there are notable exceptions to this last, such as Whitley Road itself. A farther noticeable fact is that the main drainage is not satisfactory there,

a conjunction of heavy rain and high tides causing a damming back of sewage which must be injurious to health.

This latter is fully recognised by the Council, and a scheme has been prepared by the Borough Engineer for dealing properly with the main drainage of this area.

The area was so unsatisfactory in its marshiness that special building Bye-laws were passed as to the concreting of sites to a certain height when the area began to be built over.

All the notified cases but two were removed to Hospital, and these two must have been very doubtful. There were probably many mild cases not noticed and therefore not notified.

The type of case was fairly bad, but thanks to the use of Antitoxin the fatality was very low for Diphtheria, being but 14 out of 258, or 5·4%.

Many of the cases were traced, and personal connection was a factor of importance.

In one case Tracheotomy was necessary and the patient recovered.

No cases were associated with milk supply.

School Influence :—While naturally the schools in the particularly affected area suffered most because the children of the area attended those schools, there was no indication that the schools were acting as centres of infection, the cases having occurred irrespective of classes, particular school, or even school age. The diminution during the holidays was not marked, so that it was not considered advisable to close the school mainly concerned, namely, Whitley Road Infants' School.

The months in which most cases occurred were November and December; those in which least occurred April and September. There were more in August during the main holiday than in March, April, May, June, or September.

Of the 44 cases occurring in December, for instance, 11 cases were in persons not of school age, the remainder were spread over 17 different schools, two of them private schools.

Return cases of Diphtheria have been extremely rare. Until 1907 there was one only in 13 years, and in that case there were special circumstances.

There were a few instances of what appeared to be return cases in 1908, but fortunately one is able to shew by the returns that what are supposed to be "return" cases, especially in Diphtheria, are often only coincidences.

In 1908 there were more instances of second cases from the same house being sent to Hospital just *immediately before* the return home of the first case, than there were of second cases *soon after* the return of a patient from the Hospital.

In view of the importance of such cases I have set forth the facts with regard to return cases in 1908 and generally at length.

The question as to the connection between two cases occurring at intervals in the same house is a very important one, because the Hospital is so often blamed after what is called "return" cases.

When more than one case occurs in a house, the second and following cases may occur :—

1. At practically the same time as the first case.
2. Within the length of the incubation period following exposure to contact with the first case before its diagnosis and removal.
3. After the end of the incubation period and before the return of the first case from Hospital.
4. During the period shortly following the return of the first case from Hospital or from isolation—
  - i. Within the incubation period of the disease.
  - ii. Beyond the time of the usual incubation period.
5. Many months afterwards.

Groups Nos. 1, 2, and 5 may be dismissed at present as being accidental and impossible of prevention, or independent as far as the first case is concerned.

Group No. 4 forms the group of so-called "return" cases.

Group No. 3 is important and represents infection, not from the first case direct, but possibly from the same source as the first case or from infection left in fomites, etc., from the first case, etc.

If the time during which cases occur in this group extends beyond the time the first case is in Hospital, then they pass into Group 4, and the Hospital gets the credit or discredit of sending out a case still infective.

The circumstantial evidence against the Hospital for cases in Group 4 is, of course, strong, and borne out by certain corroborative, circumstantial, scientific facts. The series of Diphtheria cases of 1908 and the history of Diphtheria in Eastbourne in previous years, however, shews that it is unwise to jump to such a conclusion without consideration, and that many so-called "return" cases have nothing to do with the return of the patient.

Certain scientific facts shew that genuine "return" cases occur. In the case of Enteric Fever, for instance, recent events have confirmed abundantly what has been surmised for a very long time—viz., that the infection of Enteric Fever will lie for a very long time dormant in a recovered patient, and that that patient may give Enteric Fever to others with whom he or she is brought into contact as many as 20 or more years later. Such patients are known as "carrier" cases.

No such case has been traced in Eastbourne, but, fortunately, native cases are practically non-existent and the imported ones are very few, so that there is not much opportunity to trace such cases. Moreover, they occur often years after the original case is forgotten.

In the case of Scarlet Fever, it is usual to expect in England about 2% of "return" cases, but in Eastbourne we have gone as many as four years without a single "return" case, and then we have had a series of such cases. When such a case is authentic and undoubted, it is invariably found, on examining the discharged patient, that there is some otorrhœa or rhinorrhœa which has developed soon after leaving the institution.

It is frequently the fact that if a common cold occurs to a patient within a few days of convalescing from Scarlet Fever, the nasal discharge contains infection. It is advisable, if possible, to give the final disinfecting bath the day before discharge from Hospital, so that the patient shall not be sent out into the open air soon after a hot bath. Convalescent wards are also advisable. Many of these so-called "return" cases, however, may be accidental and not connected with discharge from Hospital, in the same way as the Diphtheria cases I mention below must have been accidental and due to some other cause than the discharged case.

In the case of Diphtheria, with which I am here chiefly dealing, "return" cases are very rare. Until 1908 only one such case, and that doubtful, had occurred in Eastbourne in 14 years, although there had been, in the aggregate, a large number of cases. In the case of Diphtheria, where the specific germ is known to exist on the throat, etc., it is surprising, perhaps, that in these 14 years there had not been any "return" cases, for until recently it had not been the rule to examine the patients bacteriologically before being discharged, but to discharge them on clinical grounds alone.

In 1908 there have been four instances where patients have been sent to the Hospital with Diphtheria from houses to each of which a cured Diphtheria patient had been sent a few days previously. The intervals were 10, 10, 12, 12 days. These might possibly be called "return" cases, but the intervals are long for the incubation period of Diphtheria,

and there are circumstances which show that one cannot necessarily include them as "return" cases. In one case (Holloway), on receipt of the notification of the second patient, bacteriological examination of the discharged patient was at once made, and there were no Diphtheria bacteria present. Moreover, later on a third patient came from the same house. In another case (Joyce) of these four there was an intermediate case, beyond the incubation period of the first, showing that the infection was still lingering in the neighbourhood, and that intermediate case was taken away five days before the discharge of the first patient, so that this was probably not an instance of a "return" case. If sufficient investigation could have been made in the other two instances, I have no doubt that it is quite probable that these also would have been shown to have been coincidences quite as likely as "return" cases. There were, in all, 11 instances where patients came from the same house as a first patient, the first having returned. The intervals were in three instances as long as 110, 195, and 210 days, and in one case the same patient returned after being home 75 days. In another instance a case of Scarlet Fever occurred immediately. This shows abundantly that coincidences do occur, and that it is as likely that the second patient is infected in the same way as the first patient as that they obtain the disease afresh on the return of the first patient from Hospital.

The following five instances where the second case developed immediately *before* the return home of the first case show even more clearly how mistaken it is to attribute the second case always to the return home of the first case :

Discharged.			Admitted.		
(1) I. Jones	...	Dec. 31.	W. Jones	...	Dec. 30.
(2) S. Coomber	...	Nov. 17.	B. Coomber	...	Nov. 10.
(3) W. Bontoft	...	Nov. 3.	J. Bontoft	...	Oct. 19.
(4) N. Joyce	...	Nov. 26.	T. Joyce	...	Nov. 21.
(5) B. Parker	...	Dec. 7.	C. Parker	...	Dec. 1.

These cases are striking instances which show that so-called "return" cases are frequently mere coincidences, particularly when they occur in a district from which a number of cases are being removed to the Hospital at about the same time.

I thought it worth while to put on record in connection with Hospitals and "return" cases, that when, for the first time, a sufficiently large number of cases occurred to get a fair estimate, there were actually more instances of the secondary case occurring just *immediately before* the return of the patient from Hospital than there were of the secondary case occurring *just after* the discharge of a patient from Hospital.

In the case of Scarlet Fever, I have not such a striking list of coincidences to quote, but in one instance a patient was discharged to a house on September 22nd, and a second case occurred and was removed to Hospital on September 20th.

Patients are now not discharged from Hospital after Diphtheria until their throats have been bacteriologically examined.

The roads and streets chiefly affected during 1908, in proportion to their size, were:—Firle Road 8, Dennis Road 14, Manifold Road 5, Avondale Road 4, Bourne Street 8, Whitley Road 16, Winter Road 6, Beltring Road 7, Sheen Road 4, Roselands 3, and the East end of Ashford Road 4.

#### ENTERIC (OR TYPHOID) FEVER.

This disease has been conspicuous by its absence in Eastbourne in recent years. In 1908 there were seven cases as compared with an average of six per year in the previous five years.

In 1907 there was but one case.

As usual in the cases a history of consuming raw shell-fish, particularly oysters, is often forthcoming. In one of the seven cases of 1908 definite history of eating raw oysters within the incubation period was obtained. This case was

fatal. Of the other six cases, one came from Canada, one from the South of France, and one from Malvern, each bringing the disease with them. Another was a German, and no definite history could be obtained. Of the remaining two, one was very doubtful and the other somewhat so, and at all events very mild and in a young child.

Three cases were fatal.

Five of the seven patients were isolated at the Infectious Diseases Hospital.

#### PUERPERAL FEVER.

There was only one case of Puerperal Fever, and this followed a miscarriage. The patient was aged 43.

#### ERYSIPELAS.

Twenty-eight cases of Erysipelas were notified, as compared with a 10 years' average of 25.

Very few cases of Erysipelas require isolation, for though classed as an infectious illness, there is practically never a second case of Erysipelas in the same house.

The cases requiring isolation are so few that it would be a needless expense to specially prepare for them.

#### THE NON-NOTIFIABLE INFECTIOUS DISEASES.

This group includes Measles, Diarrhœa, etc., and they are far more dangerous to life than most of the notifiable diseases.

As they are not notified they are dealt with in this Report under the heading of deaths.

Information is obtained sometimes from Head Teachers, School Attendance Officers, and others. If the minimum school age were raised I have no doubt there would be less Measles and Whooping Cough.

Tuberculosis is voluntarily notifiable and is dealt with later on.

### PROCEDURE ON RECEIPT OF NOTIFICATION.

This has been detailed previously, but a short summary is as follows :—

The Sanitary Inspector visits, makes enquiries with a view to prevention of farther cases, and obtains written particulars for the Medical Officer of Health and for future use.

If, as is almost always the case, the patient is removed to the Hospital, disinfection is done at once. What can be removed to the steam disinfector is removed in bags, and the room, furniture, etc., disinfected on the spot.

If the patient is kept at home—and this is a rare course in Eastbourne—the disinfection is done at the close of the case.

Notification is sent by the Department to the Heads of Schools concerned, and to the School Attendance Officers, as to the keeping of children from school.

Examination into the sanitary condition of the house is made.

The Public Librarian is informed, and private Librarians also if necessary.

Removal to the Sanatorium is urged in every fit case, with again the same measure of success as in any other year, nearly 99 per cent. of the patients being so isolated, even allowing for doubtful cases.

### MEANS OF ISOLATION IN THE BOROUGH.

The means of isolation continue to be satisfactory and sufficient. The Isolation Hospitals include :—

1. A General Infectious Diseases Hospital—viz., the Sanatorium—for Scarlet Fever, Diphtheria, and Enteric Fever.

This is situated about 150ft. above the level of the sea on the extreme border of the town; it is the

last house out towards the Downs at the back of the town. The accommodation here consists of the following :—

For Scarlet Fever—33 beds in three pavilions.

For Diphtheria and Special Isolation—25 beds in three pavilions.

For Enteric Fever—4 beds in one pavilion.

For emergencies there are 17 beds in an iron temporary building.

Two pavilions of 12 and 4 beds respectively are reserved for use of the schools under the various members of the Eastbourne Schoolmasters' Association, and two pavilions of seven beds each are reserved for similar occupancy by children of girls' schools. These reserved pavilions are in all respects, except reservation for use, entirely supervised by the Medical Officer of Health and Matron, under the direction of the Sanitary Authority.

2. Acacia Villa.—A cottage isolated and in its own grounds, used for these two purposes :—

(a) For the lodging of persons whose houses are being disinfected.

(b) For the temporary lodgment of persons who have been exposed to infection and are not themselves ill.

This was used by 30 persons during 1908, 27 during 1907, 21 during 1906, 13 during 1905, 12 during 1904, 7 during 1903, and 32 during 1902.

3. Langney Hospital.—For Small-Pox.

This is situated just outside the eastern border of the Borough, on the Crumbles, half-a-mile from the nearest house and a mile from the next, and over a mile distant from either of the two other Institutions of Isolation. It has not been used since 1902.

A description of these three Institutions, their cost, and their working during 1908 has been given by me in the Medical Officer's Annual Report on the same.

#### REMOVALS TO THE ISOLATION HOSPITALS.

Of the patients suffering from Scarlet Fever, Diphtheria, and Enteric Fever, which are the three diseases received at the Sanatorium, 98·8 per cent. were removed thither. Four hundred and thirteen of these cases were notified and 408 were removed to the Sanatorium or Acacia Villa (2), leaving 5 cases only not removed to act as possible centres of infection.

	Cases.	Removed to Hospital.	Not Removed.	Percentage Removed.
Scarlet Fever ...	148	147	1	99·3
Diphtheria ...	258	256	2	99·2
Enteric Fever ...	7	5	2	71·4
	<hr/> 413 <hr/>	<hr/> 408 <hr/>	<hr/> 5 <hr/>	<hr/> 98·8 <hr/>

The patient with Scarlet Fever kept at home was in a social position which allowed of good isolation.

The two cases of Diphtheria kept at home were either not true cases or extremely mild.

The figures of the percentages of patients notified suffering from Scarlet Fever, Diphtheria, and Typhoid Fever, who were removed to the Sanatorium, for the past 10 years are subjoined :—

1899, 89·0 per cent of the cases.

1900, 92·1	„	„
1901, 91·4	„	„
1902, 88·7	„	„
1903, 92·7	„	„
1904, 92·7	„	„
1905, 94·3	„	„
1906, 95·4	„	„
1907, 98·9	„	„
1908, 98·8	„	„

It is very satisfactory to record this continuing popularity of the Sanatorium, and that the fatality of the cases sent there has been so comparatively small.

The keeping up of such a well-equipped Hospital is most necessary in a health resort such as Eastbourne. Various of the patients have been visitors and have much appreciated having the use of such an Institution.

Details as to administration, etc., are published in my Annual Report on the Infectious Diseases Hospital, Acacia Villa, and Langney Hospital, the nett cost of which to the Borough during 1908 (October, 1907, to October, 1908), was £2,129 10s. 10d., excluding repayment of capital and interest on capital expended.

#### DISINFECTION.

The methods of disinfection employed are the same as in previous years.

For clothing, bedding, etc., Superheated Steam (Temp. 260° F.) in a Washington Lyon Disinfecting Machine is used.

For articles such as Furs, Boots, etc., that will not stand superheated steam, washing with Formalin Solution or Perchloride of Mercury Solution is employed.

For rooms and houses fumigation with Formalin Gas by means of various lamps is the general method. Sometimes, instead of fumigation, a sprayer is used for formalin or other solution, such as Izal, McDougall's or Lawes Fluids.

Re-papering, re-painting, lime-washing, and much soap and water cleansing after the fumigation by the disinfectant gas are the methods chiefly relied on.

After "Consumption" the usual form of disinfection carried out or suggested has been wet dusting by dusters wrung out of strong disinfectant, especially Formalin, Cyllin, Izal, etc., but general disinfection is done also. Disinfection after "Cancer" is also done, on request being made, in the hope that it may be of use in preventing spread.

The disinfection of infected houses or rooms is always done by the Sanitary Inspectors or one particular man in the Sanitary Department under their immediate instructions.

The Schools have been disinfected by spraying from time to time.

At the Steam Disinfector, which is situated in the Sanatorium grounds, the following work has been done :—

Disinfecting—

Sets of Clothes (including various lots)	370
Sets of Bedding ... ..	499

This includes the Borough work as well as that of the Sanatorium.



## DEATHS.

The total number of deaths registered in Eastbourne during 1908 was 510. Of these 262 were of males and 248 of females.

The total death-rate for the Borough for 1908 was 9·90 per 1,000, and this is inclusive of every death that occurred in the Borough without any so-called corrections. Excluding deaths of non-residents (54 in number), the rate was 8·8 per 1,000 per annum.

The subjoined table compares these rates with those for preceding years and with those of England and Wales generally.

Years.	Number of Deaths.	Total Death-rate (no exclusion).	Death-rate excluding deaths of Visitors.	Death-rate of England and Wales.
1898	494	12·05	11·31	17·5
1899	566	13·56	10·37	18·2
1900	501	11·78	10·72	18·2
1901	498	11·45	10·55	16·9
1902	541	12·23	11·02	16·2
1903	495	11·00	9·62	15·4
1904	480	10·49	9·2	16·2
1905	522	11·22	9·1	15·2
1906	524	10·69	9·44	15·4
1907	555	10·99	9·9	15·0
10 years' average	517	11·54	10·12	16·4
1908	510	9·90	8·8	14·7

The rate for 1908 for England and Wales is again remarkably low, being 1·7 per 1,000 below the 10 years' average. In spite of this low rate, the rate for Eastbourne for 1908 was 4·8 per 1,000 less than that for England and Wales.

The rate of 9.90 per 1,000 is the lowest recorded in Eastbourne; in 1897 it was 9.91 per 1,000, the next lowest rate.

This table shews that the total death-rate for 1908 was 1.64 per 1,000 below the average, and the resident death-rate 1.32 per 1,000 below the average. The number of non-residents who died was again smaller than usual.

A rate of 1.64 per 1,000 below the average in a population of 51,500 shews an extra saving of 84 lives in 1908 as compared with the average of the previous 10 years.

The Borough supplies the surrounding districts with the General Hospital (Princess Alice Memorial) and the Union Infirmary and Workhouse, and deaths in these and in the various convalescent homes and smaller hospitals of the district go to swell the Eastbourne death-rate. In spite of this, the total rate is very satisfactory.

In 1908 the total death-rate was 4.8 per 1,000 below that for England and Wales; in 1907, 1906, 1905, 1904, 1903, and 1902 it was 4.1, 4.7, 4.0, 5.7, 4.4, and 4.01 per 1,000 lower respectively.

In making comparisons, it is to be noticed that the total rate has been taken in each case.

A corrected rate obtained as follows is used in the Local Government Board Tables.

The total deaths were 510; there were 27 deaths in Eastbourne in institutions of non-residents, leaving 483 deaths; to these are added deaths of 10 Eastbourne persons who died in institutions elsewhere, leaving a nett total of 493, and a corrected death-rate of 9.57 per 1,000 per annum.

In the detailed tables in the Appendix it will be found that the deaths of the 27 non-residents who died in institutions are excluded by order of the Local Government Board. The remaining 27 non-residents' deaths should with equal reason be excluded, for Eastbourne being a watering place,

there are many more visitors to Eastbourne who are likely to die than there are residents of Eastbourne likely to die visiting elsewhere. These cannot be calculated, however, and so the correction cannot be carried farther than by saying the real nett corrected death-rate would be smaller still.

### SEASONAL MORTALITY.

The deaths during the last five years, 1904, 1905, 1906, 1907, and 1908, occurred in months as follows :—

		1908.		1904.		1905.		1906.		1907.
First Qr. ...	143	{ January ... 37 February ... 66 March ... 40		137 { 40 46 51		164 { 63 44 57		132 { 44 45 43		164 { 50 58 56
Second Qr....	126	{ April ... 37 May ... 48 June ... 41		108 { 36 37 35		138 { 54 35 49		136 { 49 41 46		133 { 53 44 36
Third Qr. ...	115	{ July ... 35 August ... 36 September ... 44		105 { 32 38 35		107 { 42 30 35		136 { 49 35 52		111 { 33 36 42
Fourth Qr. ...	126	{ October ... 37 November ... 39 December ... 50		130 { 44 43 43		113 { 38 32 43		120 { 40 37 43		147 { 59 36 52

It will be noticed that in Eastbourne March is often the most fatal month ; July, August, and November the least fatal months. In 1908 January and March were unusually healthy.

The following table shews how the death-rate of Eastbourne compares quarter by quarter with that of England and Wales :—

1907. Districts.				1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Year.
Eastbourne	..	...	...	11'1	9'7	8'9	9'7	9'9
England and Wales.	{ 76 great Towns }			17'9	13'7	13'3	14'8	14'9
	{ 142 smaller Towns }			17'1	12'9	12'1	14'0	14'0
	{ Rest of the Country. }			17'8	14'1	12'4	14'3	14'7

The death-rate of Eastbourne in the third quarter was, as usual, very low ; infantile mortality from diarrhœa does not have such effect as elsewhere.

#### SEX MORTALITY.

The fact that there is an excess of females in Eastbourne would lead to a slightly diminished death-rate, since the death-rate for females is usually lower than that for males. The 510 deaths of 1908 were divided as follows :—

Males—Deaths, 262 ; Death-rate, 12·2 per 1,000.

Females— „ 248 ; „ 8·2 „

This is based on the estimate as to the proportion of sexes given under “ Population ” earlier in this Report.

The difference between the death-rate for males and that for females is not so markedly shewn as in 1906, when it was 6·1 per 1,000.

The deaths of males out of proportion to those of females were especially due to the following diseases :—Consumption or Pulmonary Tuberculosis, Premature Birth, Congenital Defects, and Infantile Debility generally, and diseases of the Urinary System. Most of these causes of death operate principally in the earlier stages of life. On the other hand, females especially exceeded males in deaths from Cancer (28 to 20) and diseases as a rule of later life.

#### AGE MORTALITY.

The age groups of the population have been given earlier in the Report, there being a slight excess in Eastbourne of young persons of a healthy age.

The death-rates at different ages and of different sexes are in some respects more important for instituting comparisons than the total death-rate, since in them there are no sex and age fallacies ; hence the following table is again subjoined for 1908 :—

Males.				Females.			Both Sexes.		
Ages.	No. living.	Deaths	Death-rate per 1,000 living at each age group.	No. living.	Deaths	Death-rate per 1,000 living at each age group.	No. living.	Deaths	Death-rate per 1,000 living at each age group.
Under 1...	465	52	111.8	483	31	66.2	948	83	87.5
1—5 ...	1824	14	7.6	1787	11	6.1	3611	25	6.9
Total under 5...	2289	66	28.8	2270	42	18.5	4559	108	23.7
5—15 ...	5205	4	0.8	4870	6	1.2	10075	10	0.9
15—25 ...	4192	12	2.8	7271	6	0.8	11463	18	1.6
25—65 ...	8820	84	9.5	14160	85	6.0	22980	169	7.3
65 & over	972	96	98.7	1451	109	75.1	2423	205	84.6

The death-rate for male children under one is 111 per 1,000, for females only 66. The male death-rate exceeds the female rate at every age group except from ages 5 to 15, but at no age so greatly as in the case of infants.

#### SENILE MORTALITY.

Of the 510 deaths which occurred in 1908, there were 205 of persons over 65 years of age.

Between 65 and 75 years of age, 95; Males 47, Females 48.

„ 75 and 85 „ 80; „ 35, „ 45.

Over 85 „ 30; „ 14, „ 16.

#### DEATHS OF VISITORS.

There were 54 deaths of non-residents in Eastbourne—27 patients from districts outside Eastbourne, in hospitals, etc., and 27 general visitors. Three died from Tubercular diseases and six from Cancer.

#### DISTRICT MORTALITY.

The deaths during 1908 were distributed over the various Districts of the Borough as shown in the following table.

The deaths which occurred in institutions have been included in the Ward from which the deceased had entered the institution :—

Districts.	No. of Deaths, 1908.	Annual Death-rates per 1,000.				
		1908	1907	1906	1905	1904
East ... ..	233	11'1	12'2	11'9	11'6	11'39
Central ... ..	95	9'4	11'7	9'2	11'0	9'72
West ... ..	32	4'7	5'3	6'2	9'1	6'26
St. Mary's ... ..	123	8'9	9'4	9'8	9'6	10'62
Deaths of non-residents in Institutions ...	27	—	—	—	—	—

The death-rate in the East District is lower than it has ever been, and is, I think, a testimony to the steady sanitary work carried out there. In this district is the largest birth-rate and the poorest people ; there is also not such an excess of females, so that a death-rate of 11'1 per 1,000 is eminently satisfactory.

The causes of death in excess in the East District as compared with the other Districts were naturally those of infancy, such as Premature Birth, Congenital Defects, Diarrhœa, and, besides these, Consumption and Cancer.

There were 98 deaths in institutions as follows :—

Institution.	Ward.	No. of Deaths.
Workhouse ... ..	St. Mary's ... ..	52
Princess Alice Hospital ... ..	St. Mary's ... ..	23
Borough Sanatorium ... ..	St. Mary's ... ..	17
Other Institutions ... ..	St. Mary's, East & West.	6

The deaths in this table have been properly distributed over the various Districts in calculating their rates.

### INFANTILE MORTALITY.

The total number of deaths of infants—that is, of children of ages under one year—was 83: males, 52; females, 31. Infantile Mortality is calculated on the number of births registered, and for 1908 was at the rate of 8·7 per 1,000 births.

As will be seen from the following table, this is next to the smallest number of deaths, and absolutely the lowest Infantile Mortality rate for Eastbourne in recent years, and is 24·3 below the 10 years' average rate per 1,000 births:—

Year.	Deaths under 1 year.	Mortality per 1,000 births.
1898	130	139
1899	136	145
1900	108	121
1901	94	104
1902	101	111
1903	97	108
1904	89	92
1905	87	102
1906	79	88
1907	92	105
Average of 10 years. }	101·3	111·5
1908	83	87·2

The rate is more important than the number of deaths. In the rate, the actual number of infants born is taken into account.

The total infantile mortality rate of 87 per 1,000 births includes all births, and is 13 below the 100 per 1,000 which has been mentioned as the lowest infantile mortality rate that a large town might aim to obtain. It is therefore very satisfactory.

The corresponding rate for legitimate children was 81 deaths per 1,000 births.

The rate for illegitimate children was 200 deaths per 1,000 births.

In other words, a proportion of over nine of every 10 legitimate children survived their first year, whereas only eight in 10 of the illegitimate children survived.

The rate in Eastbourne of 87 is a very good one, for the infantile mortality for England and Wales per every 1,000 births in 1908 was 121. Infants in Eastbourne died to the extent of 87 in every 1,000 births; the difference being, therefore, 34 per 1,000 births, or in detail a mortality of 41 per 1,000 births less than that of the 76 great towns, 37 per 1,000 less than that of the 142 other towns, and of 23 per 1,000 less than that of the rural districts. The rate in England and Wales was nearly the lowest recorded.

Thanks to its climate and other advantages, Eastbourne ought always to have a rate below the average of the country generally.

Of the 83 infants dying in 1908, 31 died in the first month, and 61 in the first six months of life: 27 died in the first week of their existence.

In the Appendix there is a table shewing the causes of the 83 deaths of infants. Prematurity accounted for 19, Bronchitis and Pneumonia for 15.

Infantile Diarrhœa was rather more prevalent in 1908 than in 1906 and 1907, but the disease was well kept in hand and the deaths were but 16.

The Notification of Births Act came into force in Eastbourne on April 1st, 1908, and of the births since 90% have been notified. Explanations—always ignorance of the Act—were forthcoming in the cases of the remainder.

An addition to the notification form was made by which medical men could indicate where visits were inadvisable.

In the other cases visiting was done when circumstances permitted by Dr. Oberdorfer and by myself. Forty-eight cases were visited immediately on notification by one of us and advice given. As a rule the visits were appreciated. More would have been made had other duties permitted. Arrangements have been made whereby children will be followed up to the age of one year when considered advisable.

Besides these 48 cases, in every instance of a birth in a poorer district advice has been given at a later stage.

Stress of work has not allowed so much personal attendance to this work as was intended by me at the adoption of the Act, but the very low infantile mortality this year shews that there is not the urgent necessity for the Act here as there is in some places, though much can be done even here.

Of the 83 deaths of infants, 59 occurred in the East, 6 in the Central, 3 in the West, and 11 in St. Mary's Districts, the remaining 4 being non residents in institutions.

The subjoined tables shew the principal causes of deaths of infants in 1908 and in recent years :—

Deaths.	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908
From Zymotic Diseases ...	65	27	28	20	23	17	14	13	12	16
Parasitic Diseases ...	—	—	1	—	1	—	—	—	—	—
Constitutional Diseases ...	8	3	6	5	2	8	4	3	6	3
Developmental Diseases ...	17	26	21	25	29	25	35	29	36	31
Local Diseases ...	29	36	28	37	34	30	27	23	35	18
Deaths from Violence ...	2	—	4	2	1	2	1	2	2	3
Deaths from ill-defined and not specified causes ...	15	16	6	12	7	7	6	9	1	12

This table indicates the steady decrease in Zymotic deaths from year to year recently, though the number in 1908 is slightly increased owing to a little extra diarrhœa :—

## ZYMOTIC DEATHS.

Disease.	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908
Measles ... ..	—	—	—	8	—	—	—	3	—	—
Whooping Cough ... ..	14	3	3	1	13	2	7	—	3	2
Diarrhœa ... ..	45	18	24	5	5	11	2	8	7	14
Other Zymotic Diseases (chiefly Influenza ... ..)	6	6	1	6	5	4	5	2	2	—

## The Causes of Death.

The deaths at all ages recorded during 1908 were distributed amongst the various classes of disease as follows. Deaths during 1906 and 1907 are similarly classified for comparison :—

Class.	Disease.	No. of Deaths.			Percentage of Total Deaths.		
		1908	1907	1906	1908	1907	1906
I.	Zymotic Diseases ...	57	47	39	4·8	8·5	7·4
II.	Parasitic and Dietic Diseases	3	4	3	0·5	0·7	0·6
III.	Constitutional Diseases.	110	132	132	21·5	23·8	25·2
IV.	Developmental Diseases	66	80	57	12·8	14·4	10·9
V.	Local Diseases ... ..	235	277	254	46·0	49·9	48·5
VI.	Deaths from Violence...	19	12	30	3·6	2·1	5·7
VII.	Deaths from ill-defined and not specified causes	14	2	8	2·7	0·4	1·5
VIII.	Not certified ... ..	6	1	1	1·1	0·2	0·2
		510	555	524	100·00	100·00	100·00

## Deaths from Zymotic Diseases.

The Zymotic death-rate of the Registrar-General refers to the rate caused by deaths from the seven principal Zymotics as follow :—Small-Pox, Measles, Whooping Cough,

Scarlet Fever, Diphtheria, Fever (Typhoid, Typhus, Continued), and Diarrhœa. The other Zymotic diseases include Miasmatic, Septic, Venereal, and Zoogenous Diseases.

These diseases in 1908 formed 11·8 per cent. of the total deaths in Eastbourne. The previous smallest percentage was 7·4 in 1907.

The Zymotic rate is to some extent the barometer of the healthiness of a district as regards preventible diseases, and the result of years of Sanitary efforts is shewn in the diminished Zymotic death-rates of recent years.

In the Appendix there will be found a complete table shewing the deaths from the seven principal Zymotic diseases compared with those of other years. The 57 Zymotic deaths of 1908 resulted from the following diseases :—

Disease.	Males.	Females.	Total.
Influenza ... ..	5	8	13
Whooping Cough ... ..	2	1	3
Diphtheria .. ...	5	9	14
Diarrhœa ... ..	9	7	16
Pyæmia, Septicæmia, etc. ...	2	6	8
Enteric Fever ... ..	2	1	3
Totals ... ..	25	32	57

Measles and Scarlet Fever are noticeable absentees from the above list, also Erysipelas. It is very rare to get a death from Scarlet Fever in Eastbourne. Enteric Fever reappears this year.

The Zymotic death-rate for 1908—that is, the death-rate from the seven chief Zymotic diseases—was 0·69 per 1,000 per annum. In 1907 it was 0·35, and in 1906 0·43.

In Table VI. in the Appendix will be found the Zymotic deaths and death-rates for the previous 10 years, and it will be seen that the rate for 1908, in spite of the large number of cases of infectious illness, is well below the average.

The lowest rate was in 1907, when it was 0·35, and the highest in recent years in 1899, when it was 2·04.

The Zymotic death-rate for England and Wales in 1908 was 1·29 per 1,000 per annum, or about twice as great as Eastbourne's rate. For the 76 great towns it was 1·59, for the 142 smaller towns it was 1·26, and for the rural districts 0·99 per 1,000 per annum.

Comparatively and absolutely, therefore, the Eastbourne Zymotic death-rate is satisfactory, although above last year's. Including Influenza and the other diseases not "principal epidemic diseases," the rate was 1·10 per 1,000.

The Zymotic rates of the respective Districts for ten years are shewn to be as in the following table:—

Year.	No. of Deaths.	Zymotic Death-rates.					
		Districts.				Town.	
		East.	Central.	West.	St. Mary's.	Death-rate from seven chief.	Total.
1899	136	3·80	2·30	0·80	3·20	2·08	2·90
1900	74	1·90	1·30	1·10	1·30	0·69	1·51
1901	54	1·75	0·55	0·45	1·71	1·01	1·24
1902	64	2·07	0·92	0·97	1·19	0·74	1·44
1903	57	1·96	1·03	0·16	0·80	0·80	1·27
1904	45	1·41	0·41	0·00	1·31	0·52	0·98
1905	45	1·07	0·50	0·62	1·11	0·40	0·94
1906	39	1·33	0·30	0·29	0·63	0·43	0·79
1907	47	1·17	0·90	0·15	0·90	0·35	0·93
1908	57	1·4	1·2	0·1	0·6	0·69	1·10

The highest recorded inclusive Zymotic rate in recent years for Eastbourne was in 1899, when it was 2·08, and the lowest in 1907, viz., 0·38 per 1,000 per annum.

The Zymotic deaths were distributed as follows:—East District, 31; Central, 12; West, 1; and St. Mary's, 8, the rates being as in the table above. Five cases were those of visitors in institutions.

#### INFLUENZA.

Thirteen deaths were registered from this disease in 1908, the average for the past 10 years being between 17 and 18. This disease has since 1890 become a permanent feature of the death lists of each community in England. There were as many as 33 deaths in 1895, and as few as 4 in 1896, but in each year there have been some deaths from Influenza. The deaths occurred at all ages, but principally late in life; three more females than males died.

#### MEASLES.

There were no deaths in 1908 from this disease. The 10 years' average has been 6·3 deaths.

#### SCARLET FEVER.

No deaths. There have been 6 deaths only in 10 years.

#### ENTERIC FEVER.

After an interval of two years I have to record three fatal cases. The average during the past 10 years has been two.

#### PUERPERAL FEVER.

There was one death. This, however, occurred after a miscarriage, and not labour.

#### ERYSIPELAS.

No deaths.

#### WHOOPING COUGH.

Two deaths occurred from this disease in 1908, the decennial average being 8·5. Just as in Measles, the serious outbreaks occur in cycles of years. There were 23 deaths in

1899, 26 in 1903, but fortunately, though a large number was due in 1907, only five actually occurred. Deaths from Whooping Cough can be largely prevented by special care.

#### DIPHTHERIA.

The unfortunate recurrence of Diphtheria in 1908 mentioned elsewhere in this report caused an increase in the number of deaths from this disease.

The 10 years' annual average has been reduced to three, but in 1908 there were 14 deaths. This is a large number of deaths for Eastbourne, but was small in proportion to the cases, viz., 258.

#### DIARRHŒA.

In 1908 deaths from Diarrhœa were only slightly in number below the average for the previous 10 years, viz., 16, as compared with 19'6.

Diarrhœa depends somewhat on meteorological conditions, hence it is difficult to compare year with year. It is better to compare place with place in the same year.

The following table compares Eastbourne with other places in this respect :—

##### *Summer Quarter, 1908.*

##### *Death-rates from Diarrhœa.*

England and Wales...	...	...	1'82 per 1,000
The 76 large towns ...	...	...	2'35   ,,
The 142 smaller towns	...	...	1'77   ,,
The Rural Districts	...	...	1'23   ,,
Eastbourne ...	...	...	0'46   ,,

No other fatal Zymotic case in 1908 calls for special remark.

---

#### Dietetic and Parasitic Diseases.

In these classes of disease there were three deaths directly ascribed to Alcoholism. The recent average has been about four per year. Similar cases are sometimes put

down to other concurrent maladies, and in 1908 four other deaths may fairly be set down to Alcoholic excess, having been certified as from Cirrhosis of the Liver.

---

### Constitutional Diseases.

The deaths from these diseases being tabulated in the Appendix, only the more important ones are, as usual, referred to here.

#### RHEUMATISM AND GOUT.

One death was registered from diseases associated with Rheumatism and one from Gout. The average for 10 years was 4·3.

#### CANCER.

Forty-eight deaths in 1908 were ascribed to the various forms of "Cancer"—25 to Carcinoma, 4 to Sarcoma, and 19 to "Cancer" generally.

The average for the previous 10 years was 43 deaths per annum, and in 1907 and 1906 the deaths were 53 and 54 respectively.

Most of the patients were from 45 to 85 years of age, and they were 20 males and 28 females. The youngest patient was under 1, the eldest over 85. Six were non-residents.

In the females the parts affected were, as usual, mainly the generative organs, the breasts, and the stomach and intestines. In the males the disease was spread over many more parts of the body, principally being connected with the alimentary canal from the mouth and stomach to the intestines.

The rate in Eastbourne in 1908 was 0·9 per 1,000—males 0·9, females 0·93, and Cancer caused 9·4% of the total number of deaths. In England and Wales for the last published year (1907) it was 0·91, 0·78 for males and 1·02 for females, but steadily increasing.

## TUBERCULOSIS.

This class of disease fortunately continues to hold the attention of Sanitarians and to a large extent that of the general public, for it is perhaps the most striking example of a preventible disease not prevented as it might be. From 1871 to the present, however, the death-rate from Phthisis has diminished by about one half from 2·2 per 1,000 to just over 1 per 1,000, so that much is obviously being done to stamp it out. Although Eastbourne draws invalids of all sorts from all parts of the country, it is satisfactory to note that our death-rate from Phthisis is below that of the country generally.

No new measures were taken in Eastbourne in 1908 beyond those described in previous Reports. The steps taken to combat the disease here are:—

1. *General attention to Health Measures*, especially the removal of conditions leading to increased Phthisis-rate, such as over-crowding, dampness of house and soil, etc. These general health measures, culminating in healthy homes, are of much more importance than Sanatoria, for only a small percentage of persons can ever use Sanatoria, and they are more curative and palliative than preventive.

2. *Notification*, followed by Cleansing and Disinfection.—The notification is voluntary, and in 1908 37 cases were notified. There were 42 deaths. It is probable about one-third of the new cases were notified. In 1909 the new compulsory notification of Poor Law cases has come into operation.

3. *Disinfection*.—This follows each case notified, and is also done after the death of a patient.

4. *Education*.—Occasionally lectures on Consumption have been given. Leaflets setting forth precautions to be taken are distributed when information as to existing cases is obtained.

5. *Bacteriology*.—Examination is made of sputum as an aid to diagnosis.

6. *Isolation*.—Except at the Workhouse Infirmary, no isolation is provided either for the well-to-do or for the poor.

In my previous Reports I have dealt fully with this.

7. *Attention to Food Supplies*.—As regards Bacteriological examination, this is now done by the Medical Officer of Health and his Assistant at the Town Hall.

Notification, by an Order of the Local Government Board dated December 18th, 1908, will be placed on a much more satisfactory footing in 1909. The following are the chief of the new provisions:—

*a.* The Medical Officers of a Poor Law Infirmary *must* notify cases in future to the Medical Officer of Health. (This is done voluntarily at present in Eastbourne).

*b.* District Poor Law Medical Officers must notify cases to the Medical Officer of Health.

*c.* Masters of Workhouses must notify to the Medical Officer of Health their future address when patients leave.

*d.* Relieving Officers must notify changes of address of patients receiving Poor Law relief.

This means a serious following up of the patient in future, but it is expressly laid down that nothing must be done to interfere with the patient's chance of earning a livelihood.

The question of a Sanatorium for educative purposes is one that should not in my opinion be allowed to drop. The disease is being spread still through poverty and ignorance, and a timely stay at an educative Sanatorium would be a great boon. In other respects in Eastbourne the disease receives proper attention.

In previous Reports I have dealt at length with the cost, etc., of a Sanatorium, and here may briefly remark that in

my opinion the principles to be aimed at as regards Sanatorium treatment are :—

1. Provision for advanced and hopeless cases which are now spreading the disease. (This is done to a great extent at the Infirmary).

2. Provision quite separately from the above for early cases, where much good can be done not merely by treatment but by educative methods.

For Eastbourne's own sake provision should only be made for ratepayers of some year's standing and their dependants.

The International Congress on Tuberculosis at Washington in 1908 dealt with the vexed question as to how far Tuberculous food and milk is responsible for human Tuberculosis. With our present knowledge it cannot be too strongly urged that the taking of Tuberculous food and milk can lead to Tuberculosis and that we cannot afford to be less strict in attention to food supplies.

Twenty-nine males and thirteen females died of Consumption in 1908, and eight males and three females of other forms of Tuberculosis. Only three were non-residents. The Consumption rate was 0·81 per 1,000—a comparatively low rate. The youngest cases were those of two infants; the oldest were four patients over 65 years of age. The age periods 25 to 35, 35 to 45, and 45 to 55 suffered most, especially 35 to 45. The average for 10 years was 44·8 deaths from Tuberculosis of the lungs and 15·1 from other forms of Tuberculosis per year, so that 1908 has been rather below the average for Eastbourne.

Ordinary Consumption caused 8% of the total deaths, and all forms of Tuberculosis combined caused over 10% of the total deaths from all causes in 1908 (including the visitors). This is much lower than in 1907.

The actual numbers of cases are given in the subjoined table :—

Disease.	Number of Deaths.									
	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908
Phthisis of the Lungs ...	40	52	44	57	33	32	42	53	53	42
Other forms of Tuberculosis ...	18	11	15	12	15	22	13	13	11	11

The last published rate for England and Wales was that of 1907—viz., 1·14 per 1,000 per annum (males 1·34, females 0·95). The rate for Eastbourne is 0·81.

A serious factor in Pulmonary Tuberculosis is that, as shewn by the figures above, it principally affects persons (especially males) at that period of their lives when they should be at work and when they have often families dependent on them.

### Developmental Diseases.

There were 22 deaths from Premature Birth in 1908. The 10 years' average has been about 18. There were, however, 19 also from Congenital defects and Marasmus.

Of these 41 deaths, 24 occurred in the East District, naturally because there were most births there; 9 occurred in St. Mary's District, a natural proportion considering the births there.

There were 34 deaths ascribed to old age, the 10 previous years' average being about 28.

### Local Diseases.

Diseases of the Nervous System caused 20 deaths, 4 from Meningitis being the largest group.

Diseases of the Heart and Blood Vessels caused 119 deaths, the chief groups being general Valvular Disease 36 and Apoplexy 38.

Diseases of the Respiratory System, apart from Tuberculosis of the Lungs, caused 45 deaths, 16 from Bronchitis and 23 from forms of Pneumonia. Fifteen of these deaths were in children under 5.

This is a comparatively very low death-rate from Respiratory diseases, viz, 0·87, and speaks well for the equability of climate.

Diseases of the Digestive System caused 37 deaths, 4 of which were from Cirrhosis of the Liver, probably Alcoholic.

Diseases of the Urinary System caused 23 deaths, 16 being from Bright's Disease or inflammation of the kidneys.

The Table in the Appendix gives details of these and other groups; they are in about the same proportion as in other years, except that deaths from diseases of the Respiratory System were fewer.

### Deaths from Violence.

There were 19 deaths from Violence, a number above the average. In 1906 there were 30, in 1907, 12. The average for the previous 10 years was 13·8.

Of these 19 deaths (about 1 in every 23 of the total deaths), 10 were due to accident or negligence, and there were 7 suicides. Of the 10 accidents, etc., 2 were in cases of non-residents.

The accidental and negligent deaths included 6 males and 4 females. The suicides were all males.

The deaths from all forms of violence were in the proportion of 0·37 per 1,000 of the population, as compared with 0·57 per 1,000 for the whole country in 1908.

### Deaths from Ill-defined and not Specified Causes.

There were 2 deaths of infants registered, the causes of which were not clearly specified.

### Uncertified Deaths.

I have to record again that 6 deaths were uncertified. The law allows this scandal, and so a legal loophole for crime remains. In England in 1908 the causes of 1·4% of the total deaths were uncertified. In Eastbourne of late there have been very few, and this increase is not satisfactory.

---

### Inquests.

Thirty-nine deaths on which Coroners' inquests were held were registered in 1908, an increase compared with the 10 years' average. The Chief Constable's report contains details. In England generally inquests were held on 7·0% of the deaths, and in Eastbourne on 7·6%.



## **SANITARY WORK, 1908.**

The remainder of this Report includes as far as possible a description of other work done in connection with House Sanitation, Legal Proceedings, Proceedings in connection with Nuisances, Offensive Trades, Factories, Workshops, and Workplaces, Bakehouses, Dairies, etc., to complete the details required by the Local Government Board in their Memorandum on Annual Reports of Medical Officers of Health.

In this section is also found the report as to Meat Inspection and Milk.

The tables and other matter are as nearly as possible in the same order and form as in previous years.

In accordance with Section 132 of the Factory and Workshops Act, 1901, I also "report specifically on the administration of this Act in Workshops and Workplaces," and have sent a copy of this Report to the Home Secretary.

Inspection of houses by the Medical Officer of Health in accordance with Section 26 of the Customs and Inland Revenue Act, 1890, has also been carried out.

The Staff consists of an Assistant Medical Officer of Health (part time), three Inspectors, two Clerks, and a general Handy Man for assisting in disinfection, drain testing, etc.

Miss Oberdorfer, M.B., Ch.B., has been engaged in assisting at the general work of the Department when not engaged on School Inspection.

The School matters are dealt with in our special report.

The areas over which the three Inspectors work are arranged according to the old Wards, for the four original

Wards, though of unequal populations and areas, were and are useful units for the formation of districts for Sanitary work. In the West Ward drainage work and the details of house sanitation form a large part of the duties ; in the East Ward, with its poor and dense population, the greatest opportunities are afforded for carrying out Public Health work in all its branches, with life saving and health improving results. As it is the only ward with a birth-rate above 20 per 1,000, the East Ward is particularly important from a Public Health point of view. The Central and St. Mary's Wards combine both the well-to-do and the poorer elements of population. The Inspector for St. Mary's Ward is also Meteorologist.

The work at times is exceedingly difficult to keep pace with. It speaks well for the work of the staff that the reputation for health that Eastbourne justly maintains is kept up at a cost as regards Inspectors less than that of any other health resort of its size in the Kingdom, and less than that of many smaller resorts.

The three Sanitary Districts are :—

1. The East District—Population (estimated 1907), 20,828. Mr. E. G. Spears, Sanitary Inspector (Chief).
2. The West and Central Districts—Population together, 16,789. Mr. J. H. Ollett, Sanitary Inspector.
3. The St. Mary's District—Population, 13,882. Mr. S. R. Henderson, Sanitary Inspector and Meteorologist.

All the Sanitary Inspectors have diplomas, and have, each in his own district, full charge in all respects under the Medical Officer of Health, there being no special Inspectors for Food and Drugs Acts, Infectious Disease and Disinfection, etc.

## Infectious Diseases, 1908.

	East District.	Central District.	West District.	S. M'ry's District.	Total.
Number of cases notified ...	294	42	18	88	442
Number removed to Sanatorium	275	36	16	81	408

The Inspectors' work regarding these has been mentioned earlier in the Report. Each case involves visiting and disinfection.

Besides the work done in connection with notified cases, disinfection was frequently done in other instances, regularly as regards Phthisis, and sometimes after Cancer, Measles, Chickenpox, etc.

---

### House Sanitation.

The up-to-date nature of the sanitary details of Eastbourne houses is a special feature of the Borough, and undoubtedly partly responsible for the diminishing death-rate, culminating this year in the lowest on record.

The climate, healthy situation, etc., were the same when the death-rate was 15 per 1,000 instead of 10, and then also the town was less full and less built over. Constant attention to sanitary details in houses is most important for the general health of the people. The issuing of Sanitary Certificates has been an important factor in getting good work done.

House to house visiting by the Inspectors is done to some extent, but their time has been almost entirely taken up by dealing with matters brought to their notice directly or indirectly.

On receipt of information as to a sanitary defect or nuisance, the attention of the owner or occupier has been called to the fact either verbally or by letter. The great majority of nuisances are dealt with in this way. If no

steps are taken to abate the nuisance or remedy the defect, the matter is brought before the Sanitary Committee and a legal notice is served. If, again, no steps are taken on the issue of this notice, the attention of the owner or occupier is again called to the matter by letter, and legal proceedings follow. The number of legal proceedings for house sanitation is now practically *nil*.

Notices for structural repairs are always served on the owner; for keeping the house clean and in a satisfactory state the tenant is responsible.

At the end of 1905 the Council transferred all drainage work of existing houses, and in houses for Sanitary Certificates, from the Building Surveyor to the Sanitary Department. Time, expense, and irritation to builders and the officers themselves have been saved by this new procedure, and there have been no difficulties in its working.

A summary of some of the work done by the Inspectors throughout the year, especially with regard to structural work in older houses, abating nuisances, and general improvement of sanitary conditions is subjoined. Much of the work has been done in connection with the granting of Sanitary Certificates. It is not possible to tabulate all the work.

## RETURNS AS TO STRUCTURAL ALTERATIONS.

	Central & West.	East.	S. Mary's.
Drains examined and tested ... ..	235	185	170
„ re-laid and amended ... ..	195	179	145
Interceptors fixed ... ..	63	49	63
Drain ventilation improved... ..	55	97	38
New w.c. apparatus provided ... ..	176	160	142
W.c. apparatus repaired ... ..	516	77	34
W.c. flushing power improved ... ..	356	92	27
D-traps removed ... ..	46	9	4
New soil pipes fixed ... ..	82	19	70
Soil pipe ventilators enlarged ... ..	85	49	17
New main taps provided ... ..	167	21	47
Waste pipes trapped... ..	322	54	60
Sanitary dustbins provided ... ..	187	144	73
Back yards paved or repaired ... ..	81	179	90
Sinks renewed or repaired ... ..	253	50	55
New sink wastes ... ..	276	67	130
Safes provided under w.c. ... ..	114	20	161
W.c. cisterns fixed ... ..	128	49	51
Cleansing of premises ... ..	242	211	55

The above refer to old houses only, or to certificated houses. They represent the main part of the Inspectors' work as regards structural amendments.

Besides the work specified in the above table, many other useful sanitary improvements have been carried out, particularly the remedying of dampness by making roofs and walls watertight and by attending to eaves guttering and spouting. The improper keeping of rabbits, fowls, etc., required and received constant attention.

The level of the ground water is very near the level of the floors in some of the houses in the "marsh district," and

these require frequent attention. A damp house is a most unhealthy one. Longstone Road East is very unsatisfactory in this respect.

Nine hundred and eighteen entries were made in the Inspectors' Permanent Journal as to objectionable conditions found in certain premises—*i.e.*, as to serious defects—and 713 entries had to be carried forward to the Register of Defects to submit to the Committee to enforce abatement of nuisance.

Six hundred and seventy-seven notices were issued, as shewn in tables appended, and very many letters and reports were also written concerning nuisances on premises. In addition to the 677 notices, 193 special letters were written requesting structural amendments to be made, with a view to getting the work done without legal formalities; these 193 letters affected many more different premises, almost entirely dwelling houses. Innumerable verbal notices have been given concerning trivial nuisances, and also where nuisances required very immediate treatment.

#### RETURN AS TO GENERAL VISITS BY INSPECTORS IN ADDITION TO MANY CASUAL VISITS.

	East.	Central & West.	S. Mary's.
VISITS FOR INSPECTION OF :—			
Dwelling-houses ... ..	743	452	247
Schools ... ..	128	13	20
Dairies, Cowsheds, etc. ... ..	59	44	45
Slaughter-houses and Butchers' Shops ...	205	134	102
Bakehouses ... ..	63	77	14
Fruiterers, Fishmongers, etc. ... ..	142	138	37
Stable and other Premises ... ..	684	665	300
Factories, Workshops, and Work-places...	641	298	59
Visits in connection with Notifications ...	486	321	204
Premises in which Drains have been tested ...	525	422	295

## Notices Issued.

## EAST DISTRICT.

	No. Issued.	No. com- plied with.	No. lapsed.	No. out- standing.
<i>a</i> Sec. 91 of Public Health Act ...	151	118	—	33
<i>b</i> Sec. 36     "     "     " ...	90	80	—	10
<i>c</i> Sec. 41     "     "     " ...	72	43	—	29
<i>f</i> Sec. 46     "     "     " ...	98	91	1	6
<i>g</i> Sec. 34     "     "     " ...	—	—	—	—
Totals ...     "     "     " ...	411	332	1	78

## CENTRAL DISTRICT.

	No. Issued.	No. com- plied with.	No. lapsed.	No. out- standing.
<i>a</i> Sec. 91 of Public Health Act ...	62	42	2	18
<i>b</i> Sec. 36     "     "     " ...	17	13	—	4
<i>c</i> Sec. 41     "     "     " ...	—	—	—	—
<i>d</i> Sec. 49     "     "     " ...	8	8	—	—
<i>f</i> Sec. 46     "     "     " ...	8	5	—	3
<i>g</i> Sec. 34 Factories & Workshops Act     "     "     "     " ...	2	—	—	2
Totals ...     "     "     " ...	97	68	2	27

## WEST DISTRICT.

	No. Issued.	No. com- plied with.	No. lapsed.	No. out- standing.
<i>a</i> Sec. 91 of Public Health Act ...	13	8	—	5
<i>c</i> Sec. 36     "     "     " ...	3	3	—	—
<i>f</i> Sec. 46     "     "     " ...	2	2	—	—
Totals ...     "     "     " ...	18	13	—	5

## ST. MARY'S DISTRICT.

	No. Issued.	No. com- plied with.	No. lapsed.	No. out- standing.
<i>a</i> Sec. 91 of Public Health Act ...	79	58	—	21
<i>b</i> Sec. 36        „        „        ...	22	22	—	—
<i>f</i> Sec. 46        „        „        ...	43	31	—	12
<i>g</i> Sec. 34 Factories & Workshops Act        ...        ...        ...	7	6	—	1
Totals ...        ...        ...	151	117	—	34

*a* To abate Nuisances of various sorts, including overcrowding (Sec. 91 Public Health Act).

*b* To provide proper closets, dustbins, etc.

*c* To re-lay and repair defective drains.

*d* To remove offensive accumulations.

*f* To cleanse, disinfect, etc., houses.

*g* To limewash, etc., bakehouses.

The above legal notices were served when it was found the necessary work was not being carried out after attention was called to the defect verbally or by letter.

## SANITARY CERTIFICATES.

During 1908, 56 new Sanitary Certificates were issued, that is to say, in 56 houses the up-to-date regulations for the Certificate were complied with. The numbers issued in the immediate previous years were 45, 55, 50, 55, 91, 62, and 70 respectively. The total number now issued is 1,369, and only a few of these have been second issues for the same house, so that over 1,300 houses have now been brought so thoroughly up-to-date as to receive the Certificate. The remainder are well looked after, and could in most cases obtain the Certificate for a small outlay.

Thirty old Certificates have been endorsed during 1908 after thorough re-examination and re-testing of the house drainage, etc.

The procedure after Certificates have been in existence for three years is to send copies of a circular to owners or

occupiers, reminding them that three years have elapsed since the issue of the Certificate and offering re-examination and re-testing. If the owner requires a totally new Certificate, then he must comply with the requirements now in force, but if he elects to have the old Certificate endorsed simply, then the soil-pipes, drains, etc., must be re-tested with the former tests and proved quite sound, and the fittings must be in good working order.

The Sanitary Certificate of the Borough of Eastbourne is now a well-established item in the sanitary world, and there have been many imitations.

One of the chief advantages of these Certificates is that they ensure a good system of drain-laying and plumbing in all work, whether for Certificate or not, because the men are accustomed to work for Certificates. House sanitation in general is, therefore, brought to a higher standard than it otherwise would be.

#### SCHOOL SANITATION.

All the Elementary Schools of the Borough have been frequently visited by myself, both as Medical Officer of Health and as School Medical Officer. Dr. Oberdorfer has constantly been at the Schools. They have been frequently visited by the Sanitary Inspectors and any defects noticed have been remedied. They all have their water supplies from the public service. Most of the private schools in the Borough have also been visited.

A special report on the Elementary Schools will be issued in accordance with the Board of Education's instructions.

#### HOUSING OF THE WORKING CLASSES ACT.

No steps have been taken under this Act during 1908.

#### REFUSE REMOVAL.

Ordinary house refuse is removed once weekly by the Corporation from all houses, and twice weekly during the

months of July, August, and September. Fish and similar refuse from shops is removed daily, except on Sundays, and there are two collections on Saturdays. The whole is burnt at the Refuse Destructor.

In 1898, the removal of House Refuse was transferred to the Sanitary Department, and for the first time a systematic weekly collection was instituted.

In 1900 the extra summer collection commenced.

In 1906 the small part of the Borough, hitherto cleared by a Contractor, was included with the rest of the Borough for Corporation collection.

Each improvement in the system of collection and its frequency has been coincident with a decrease of illness and death, especially from diarrhœa.

During the past few years a vigorous crusade against insanitary dust bins has been carried on and has contributed to the improved results.

At the end of 1907 the superintendence was re-transferred to the Borough Engineer, it being properly a matter for his Department, and the conditions under which I temporarily arranged it having changed.

#### SLAUGHTER-HOUSES AND MEAT INSPECTIONS.

There is no Public Abattoir in Eastbourne, and hence complete supervision of slaughtering and of meat is not practically possible.

There are four Slaughter-houses only in Eastbourne ; three in the East Ward, namely :—The Crumbles, Latimer Road and Bourne Street Slaughter-houses ; and one in St. Mary's Ward, namely :—Upwick Slaughter-house : these Slaughter-houses are all private.

Though not entirely satisfactory, especially those at Upwick and on the Crumbles, there is nothing in the absence of a Public Abattoir to prevent their being licensed annually.

No written complaints have been received about them during 1908.

Most of the meat consumed in Eastbourne is slaughtered outside the Borough—that from such places as Deptford, is adequately supervised; but in some other places from which meat comes supervision is the reverse of efficient.

### UN SOUND FOOD.

As far as it can be done by the Sanitary Department, all meat slaughtered in Eastbourne is inspected, but the numerous other duties of the Staff make it impossible for the whole of the slaughtering to be watched, and most carcases are put on the market without being seen at the slaughter-house. Inspection of the food in the shops is, however, regularly carried on. Mr. Henderson has the certificate of the Sanitary Institute for Meat Inspectors.

The following seizures and surrenders of unsound food were made in 1908 :—

About 12lbs. unsound tomatos	...	...	...	(surrendered)
2 cwt. haddocks	...	...	...	„
10lbs. sausages	...	...	...	„
6lbs. liver	...	...	...	„
2lbs. diseased liver	...	...	...	„
One viscera of a bullock	...	...	...	(seized)
One hind loin of pork...	...	...	...	„
One whole bullock	...	...	...	„

There was no necessity in any case for legal proceeding.

---

### Sale of Food and Drugs Acts.

Under these Acts in 1908, 155 samples of foods were taken and 140 were genuine, 15 being unsatisfactory. This percentage of adulterated or “preserved” samples—viz., just under 10%—is not so very high, and there were no serious cases, as the subjoined list will shew, except, as usual, in the case of milk.

## ANALYSES, 1908.

Foodstuffs.	Samples taken.	Returned as		
		Genuine	Adulterated.	
Milk ... ..	92	79	13	1 deprived of 16% of fat. 1 " 13% " 1 " 10% " 1 " 9% " 1 " 8% " 1 contained 13% added water. 1 " 11.4% " 1 " 9% " 1 " 3.5% " 1 " 2% " 1 contained 10 grains of boric acid per gallon. 1 contained a trace of pus and a distinct trace of blood. 1 contained a minute trace of pus and a trace of blood. 2 contained 50% of butter fat and 50% other than butter fat.
Butter ... ..	31	29	2	
Cheese ... ..	3	3	...	
Cream ... ..	1	1	...	
Curry Powder ... ..	1	1	...	
Coffee ... ..	2	2	...	
Brandy ... ..	1	1	...	
Gin ... ..	1	1	...	
Whiskey ... ..	2	2	...	
Sal Volatile ... ..	1	1	...	
Liquorice Powder ... ..	1	1	...	
White Pepper ... ..	1	1	...	
Lard ... ..	2	2	...	
Margarine ... ..	4	4	...	
Tea ... ..	1	1	...	
Ginger Wine ... ..	1	1	...	
Ground Rice ... ..	1	1	...	
Ice Cream ... ..	4	4	...	
Wholemeal Flour ... ..	1	1	...	
Mixed Spice... ..	1	1	...	
Ground Ginger ... ..	2	2	...	
Arrowroot ... ..	1	1	...	
Totals... ..	155	140	15	

A second list is subjoined of samples taken unofficially for special purposes. Two of them led to official samples being taken and to detection of fraud.

Foodstuffs, etc.	Samples taken.	Returned as		Results.
		Genuine	Adulterated.	
Butter ... ..	7	5	2	2 contained 50% margarine and 50% butter.
Margarine ... ..	1	1	...	
Wholemeal Flour ...	1	1	...	

### MILK.

This is the foodstuff which is most frequently and seriously interfered with through negligence and fraud. It is, unfortunately, most easily contaminated and adulterated, but the principal dairymen in Eastbourne are extremely careful, although 13 out of the 92 samples taken were unsatisfactory. Milk has to go through too many hands from the cow to the consumer for detection of the offender to be easy, especially in the case of "abstraction of fat," which is often wrongly excused as being due to the unoffending cow itself.

Of the 13 instances of sophistication, 5 were of abstraction of fat and 5 of added water.

In one instance boric acid compound had been added, but in minute amount, hence the offender was cautioned only.

Two samples taken during delivery from farmer to dairyman contained pus and blood in small amounts. They came from separate farms, and Dr. Stott, Medical Officer of East Sussex Combined Districts, kindly investigated the circumstances. In one case no cow suffering from any disease of the udder was found, but in the other a cow with inflammation of the udder was discovered. Prosecution failed, on the form of the certificate, unfortunately.

The Sanitary Committee determines on legal proceedings without knowledge of the names of the offenders, and the results are set forth in the table of "Legal Proceedings."

It is to be hoped that some alteration will soon be made as to the defence of warranty. As usual, this defence was successfully set up once in 1908, and when the guarantor was summoned he, too, got off, reducing the proceedings to a farce owing to the state of the law on the subject.

In one instance the third sample was sent to Somerset House, the Analyst's report being upheld.

### Legal Proceedings for the Year 1908.

No.	Nature of Offence.	Date of Hearing	Result.
1	Selling milk which was deficient in fat to the extent of 10%.	May 18	Fined £3 inclusive.
2	Selling milk which was deficient in fat to the extent of 16.7%.	July 13	Fined £3 inclusive.
3	Selling milk which contained at least 3.5% of added water.	„ 15	Case adjourned for analysis of milk by Government Analyst
4	Selling milk which contained at least 3.5% of added water.	„ 27	Fined £3 inclusive.
5	Selling milk which contained at least 11.4% of added water.	Sept. 3	Fined 30/- inclusive.
6	Selling milk which was deficient in fat to the extent of 8%.	Oct. 10	Case dismissed on production of warranty.
7	Selling milk which contained at least 2% of added water.	„ 19	Fined £2 and £1 os. 6d. costs
8	Selling milk which was deficient in fat to the extent of 13%.	Nov. 11	Fined 20/- and 15/6 costs.
9	Guarantor of warranty summoned	„ 16	Case dismissed.
10	Selling milk containing traces of pus and blood.	„ 16	Case dismissed on the certificate, and not on its merits.
11	Selling milk containing traces of pus and blood.	„ 16	Case withdrawn following the above.
12	Selling milk which contained at least 13% of added water.	„ 20	Fined 20/- and 15/6 costs.
13	Selling milk which contained at least 9% of added water.	„ 20	Fined 20/- and 15/6 costs.
14	Selling butter composed of 50% margarine and 50% butter.	Dec. 9	Fined £5 inclusive.
15	Selling milk which was deficient in fat to the extent of 9.3%.	—	Case withdrawn.

## DAIRIES, COWSHEDS AND MILKSHOPS ORDERS OF 1885-6.

The regulations under these Orders have received constant attention throughout the year.

Those Cowsheds and Dairies in the Borough are in good condition.

	East District.	Central District.	West District.	S. M'ry's District.	Total.
Number of Dairies on Register ...	12	11	4	4	31
„ Cowsheds „ ...	1	—	2	4	7
„ Milkshops „ ...	45	14	6	9	74
Infectious Diseases among Em- ployés ... ..	5	3	—	2	10
Infectious Disease on Premises ...	1	—	—	1	2
Notice to Abate Nuisance... ..	5	—	—	2	7
Number Registered in 1908 ...	14	3	—	3	20
Number Removed from Register in 1908 ... ..	13	2	—	—	17

## OVERCROWDING.

As usual, a very few cases of overcrowding had to be dealt with and no legal proceedings were necessary. In the case of the poor with very large families it is impossible to always obtain the best of conditions in this respect.

## OFFENSIVE TRADES.

There are now five places where “Offensive Trades” are carried on besides fried-fish shops. The Tower Street Marine Stores were closed and re-opened elsewhere; but in Beach Road they were also the cause of nuisance and are now closed.

## MORTUARY.

This well-equipped building, adjoining the Town Hall, is under the management of the Police.

## CELLAR DWELLINGS.

These do not exist in Eastbourne.

## PUBLIC BATHS.

There are two sets of Public Baths in the Borough—viz., in Seaside and in the Old Town—and one Municipal Swimming Bath in the Old Town.

*Seaside Baths.*—The numbers using these Baths are shewn in the returns below :—

Year.	Baths used by—			Total.
	Men.	Women.	Children.	
1903	... 9110	2415	592	12117
1904	... 10773	2834	561	14168
1905	... 10800	2976	578	14354
1906	... 11361	3225	623	15209
1907	... 10201	2850	480	13531
1908	... 10949	3380	580	14859

The receipts for 1908 were £197 11s. 11d.

The loss for the year ended 31st March, 1908, on these Baths was £195 6s. 8d., but there is a great gain as regards sanitation, and very few baths ever pay their way.

It has been suggested that the number of baths should be increased here, but it is only occasionally that all the baths are in use.

*Old Town Baths.*—These were opened Jan. 5th, 1905.

Year.	Baths used by—			Total.
	Men.	Women.	Children.	
1905	... 3057	522	689	4268
1906	... 4060	704	562	5326
1907	... 4275	691	408	5374
1908	... 4712	929	423	6064

*Swimming Bath.*—

1905	...	5902	597	4146	10645
1906	...	6200	865	4215	11370
1907	...	6385	1574	3303	11262
1908	...	6749	1860	5114	13723

Of the children using the Swimming Bath, 3,598 were boys and 1,516 girls. The increase of over 2,000 during 1908 is satisfactory.

The receipts for 1908 were £251 13s. 8d.

The loss for the year ended March 31st, 1908, was £277 8s. 2d.

The Swimming Bath, lined with white tiles and glazed bricks, is 60ft. long and is provided with water from a well on the premises, so that the water can be changed whenever necessary at a very small cost.

Lessons are given, and many, including ladies and children especially, have learned to swim. Life-saving classes are held, and the bath has continued to be very useful. The Swimming Club officials and some of the Elementary School teachers have kindly helped to make the Swimming Bath a success.

---

### Premises Receiving Constant Inspection and Attention during the Year.

EAST DISTRICT.					1908.
Number of Bake-houses	...	...	...	...	22
„ Cowsheds	...	...	...	...	1
„ Farm Yards	...	...	...	...	3
„ Dairies and Milkshops...	...	...	...	...	57
„ Private Stables	...	...	...	...	86
„ Livery Stables	...	...	...	...	8
„ Piggeries	...	...	...	...	4
„ Slaughter-houses	...	...	...	...	3
„ Offensive Trades	...	...	...	...	5

### CENTRAL AND WEST DISTRICT.

Number of Bake-houses	...	...	...	...	20
„ Cowsheds	...	...	...	...	2
„ Farm Yards	...	...	...	...	2
„ Dairies and Milkshops...	...	...	...	...	26
„ Private Stables	...	...	...	...	188
„ Livery Stables	...	...	...	...	25
„ Piggeries	...	...	...	...	3
„ Slaughter-houses	...	...	...	...	—
„ Offensive Trades	...	...	...	...	—

## ST. MARY'S DISTRICT.

Number of Bake-houses	...	...	...	...	8
„ Cowsheds	...	...	...	...	4
„ Farm Yards	...	...	...	...	4
„ Dairies and Milkshops	...	...	...	...	13
„ Private Stables	...	...	...	...	85
„ Livery Stables	...	...	...	...	3
„ Piggeries	...	...	...	...	6
„ Slaughter-houses	...	...	...	...	1
„ Offensive Trades	...	...	...	...	—

## Office Work during 1908.

Calls and Communications received and entered	...	3796
Letters and Reports written	... ..	831
Entries made in Inspector's Journal	... ..	918
Entries made in Register of Defects and Nuisances	...	713
Notices Issued	... ..	677
Entries made in Register of Samples taken	... ..	155
Returns of Inspectors' work made to Committee	...	12
Entries made in "Report Book" on Infectious Cases	...	445
Monthly Returns on the Health of Eastbourne to		
Members of Sanitary Committee and others	...	216
Sanitary Certificates issued	... ..	56
Sanitary Certificates endorsed	... ..	30
Entries made in Register of Cowsheds and Dairies	...	19
Entries made in Register of Bake-houses	... ..	147
Entries made in Register of Slaughter-houses	... ..	4
Licenses issued for the same	... ..	4
Entries made in Register of Unsound Food	... ..	8
Entries made in Register of Letters requesting Amend-		
ments	... ..	193
Letters written requesting Amendments to be made	...	193
Samples of Eastbourne Water taken for analysis by		
Public Analyst	... ..	6
Samples of Water taken for analysis by Medical Officer		52
Cleansing Certificates given	... ..	155
Passes for visiting Sanatorium (grounds only)	...	624

## Factory and Workshop Acts.

As usual, and in accordance with the Home Office instructions, I submit in tabular form a summary of the working of these Acts as far as they concern the Sanitary Authority.

I have had great difficulty in getting correct and complete lists of outworkers, in spite of the issuing of warning circulars and even the printed forms. The difficulty was so great that I wrote to the Home Office during the year and asked whether wholesale legal proceedings should be taken, and, if so, by whom—the Local Authority or the Home Office. The Factory Inspector of the district kindly called at the Town Hall, and also at some of the Workshops, and one may hope for better returns in future.

Not only are lists not properly sent in to me, but they are also not properly kept at the places distributing the work. The total number of outworkers is not, however, great.

### FACTORIES, WORKSHOPS, LAUNDRIES, WORKPLACES, AND HOMEWORK.

#### I.—INSPECTION.

Premises.	Number of	
	Inspections.	Written Notices.
Factories... .. (Including Factory Laundries).	79	3
Workshops ... .. (Including Workshop Laundries).	507	31
Workplaces ... ..	570	19
Total... ..	1156	53

## II.—DEFECTS FOUND.

Particulars.	Number of Defects.	
	Found.	Remedied.
<i>Nuisances under the Public Health Acts :—</i>		
Want of cleanliness ... ..	33	33
Want of ventilation ... ..	3	1
Overcrowding ... ..	2	2
Want of drainage of floors ... ..	5	5
Other nuisances ... ..	30	30
Sanitary accommodation insufficient ... ..	1	1
"          "          unsuitable or defective ...	21	21
"          "          not separated for sexes ...	1	1
Offences under the Factory and Workshop Act, excluding outwork ... ..	2	2
Total ... ..	98	96

## III.—OTHER MATTERS.

Class.	Number.	
Matters notified to H.M. Inspectors of Factories :—		
Failure to affix Abstract of the Factory and Workshop Act (Sec. 133) ... ..	—	
Action taken in matters referred by H.M. Inspectors as remediable under the Public Health Acts, but not under the Factory Act (Sec. 5). Notified by H.M. Inspector ... ..	4	
Underground Bakehouses (Sec. 101) :—		
In use during 1908 ... ..	14	
Certificates granted in 1908 ... ..	Nil	
	Number of	
Homework :—	Lists.	Out-workers.
<i>Lists of Outworkers</i> (Sec. 107) :—		
Lists received ... ..	16	34
Homework in unwholesome or infected premises :—	Wearing Apparel.	Other.
Notices prohibiting homework in unwholesome premises (Sec. 108) ... ..	—	—
Cases of Infectious Disease notified in homeworkers' premises ... ..	—	—
Workshops on the Register at the end of 1908 ... ..	552	
Bakehouses ... ..	50	
Total number of Workshops on Register... ..	602	

**Bake-houses.**

The various bake-houses of the Borough have received full attention during the year. They have all been white-washed, etc., in May and November.

I submit a list of the various workshops and workplaces in the Borough arranged according to districts.

There are also very many small premises hardly possible to be included among workshops and workplaces which have received constant attention during the year.

## EASTERN DISTRICT.

Business.	Factory.	Workshop.	Workplace.
Bakehouses ... ..	I	21	—
Boat Builders ... ..	—	I	—
Basket and Trunk Makers ... ..	—	I	—
Bootmakers ... ..	2	11	—
Breweries and Bottling Stores ... ..	I	—	—
Brickyards ... ..	—	—	I
Carpet-Beating Works ... ..	2	—	—
Carpenters, Cabinet Makers, etc. ... ..	I	9	—
Coach Smiths, Trimmers, etc. ... ..	I	2	—
Clay Pipe Manufacturers ... ..	—	I	—
Confectioners ... ..	—	I	—
Cutlers ... ..	I	—	—
Cycle Makers and Motor Car Repairers ... ..	I	4	—
Dairymen ... ..	—	—	10
Destructor Works ... ..	—	—	I
Dressmakers and Milliners ... ..	—	5	—
Electricity Works ... ..	I	—	—
Engineers ... ..	4	I	—
Electro-Platers ... ..	I	—	—
Firewood Works ... ..	3	I	—
Fish Friers ... ..	—	7	—
Gas Works ... ..	—	—	I
Laundries ... ..	11	18	—
Mineral Water Manufacturers ... ..	I	—	—
Marine Stores ... ..	—	—	5
Market Gardens and Nurseries ... ..	—	—	4
Plumbers and Gas Fitters ... ..	—	2	—
Photographers ... ..	—	2	—
Printers ... ..	2	—	—
Restaurants ... ..	—	—	5
Saddlers ... ..	—	2	—
Stables ... ..	—	—	17
Shoeing and General Smiths ... ..	—	8	—
Stonemasons ... ..	—	—	I
Timber Merchants ... ..	2	—	—
Tailors ... ..	—	13	—
Upholsterers ... ..	—	2	—
Watch and Clock Repairers ... ..	—	3	—
Totals ... ..	35	115	45

## WEST AND CENTRAL DISTRICTS.

Business.	Factory.	Workshop.	Workplace.
Basket and Trunk Makers ... ..	—	6	—
Bakers and Confectioners ... ..	—	20	—
Bookbinders ... ..	—	1	—
Bootmakers and Repairers ... ..	1	24	—
Brewery ... ..	1	—	—
Builders and Builders' Merchants ... ..	6	12	3
Carpenters, Cabinet Makers, etc. ... ..	7	41	—
Coach Builders, Trimmers, and Smiths ... ..	—	7	—
Carpet Planner ... ..	—	1	—
Corset Makers ... ..	—	3	—
Cutlers ... ..	2	—	—
Cycle Makers and Repairers ... ..	2	9	—
Dairymen ... ..	—	—	11
Dentists ... ..	—	9	—
Dress and Mantle Makers ... ..	—	34	—
Electricians ... ..	—	15	—
Engineers ... ..	2	5	—
Fancy Needlework ... ..	—	2	—
Fish Frying ... ..	—	—	3
French Polishers ... ..	—	2	—
Fruiterers ... ..	—	—	3
Gasfitters ... ..	—	19	—
Gymnasiums ... ..	—	—	2
Grocery Stores ... ..	—	—	8
Hairdressers and Wig Makers ... ..	—	8	—
Jewellers and Watchmakers ... ..	—	12	—
Laundries ... ..	1	3	—
Leaded Light Works ... ..	—	2	—
Milliners ... ..	—	21	—

WEST AND CENTRAL DISTRICTS—*Continued.*

Business.	Factory.	Workshop.	Workplace.
Mineral Water Factory ... ..	I	—	—
Nursery Gardener ... ..	—	—	I
Painters ... ..	—	24	—
Photographers... ..	—	10	—
Piano Repairers ... ..	—	3	—
Picture-frame Makers ... ..	—	8	—
Plumbers, etc. ... ..	—	24	—
Pork Butchers (Motive Power) ... ..	3	—	—
Printers ... ..	11	I	—
Relief Stamper ... ..	—	I	—
Restaurant and Hotel Kitchens ... ..	—	—	22
Saddlers ... ..	—	3	—
Scale Makers ... ..	—	2	—
Sign Writers ... ..	—	4	—
Smiths, Fitters, etc. ... ..	—	23	—
Stables ... ..	—	—	32
Stonemasons ... ..	I	—	—
Tailors ... ..	—	18	—
Telephone Exchange... ..	—	—	I
Umbrella Makers ... ..	—	3	—
Undertakers ... ..	—	2	—
Upholsterers and Bedding Makers ... ..	I	14	—
Water Works (Pumping Station) ... ..	I	—	—
Window Blind Makers ... ..	—	3	—
Wheelwrights ... ..	—	2	—
Wine Cellars ... ..	—	—	4
Wood Carvers and Turners ... ..	2	2	—
Firewood Choppers ... ..	—	I	—
Totals ... ..	42	404	87

## ST. MARY'S DISTRICT.

Business.	Factory.	Workshop.	Workplace.
Bakehouses ... ..	1	7	—
Bottling Stores ... ..	3	—	—
Breweries ... ..	1	—	—
Bootmakers ... ..	—	10	—
Carpenters, Cabinet Makers, etc. ... ..	1	14	—
Coach Smiths ... ..	—	2	—
Cycle Works ... ..	—	2	—
Dressmakers and Milliners ... ..	—	14	—
Flour Mills (Steam) ... ..	1	—	—
Firewood Works ... ..	1	—	—
Furniture Stores ... ..	—	—	1
Laundries ... ..	3	9	—
Mineral Water Works ... ..	2	—	—
Nursery Gardens ... ..	—	—	3
Plumbers ... ..	—	8	—
Saddlers ... ..	—	2	—
Shoeing and General Smiths ... ..	—	3	—
Stables ... ..	—	—	7
Stonemasons ... ..	—	1	—
Tailors ... ..	—	6	—
Upholsterers ... ..	—	2	—
Wheelwrights ... ..	—	3	—
Water Works (Pumping Station) ... ..	1	—	—
Total ... ..	14	83	11

# APPENDIX.

---



**Local Government Board and other Tables.**

TABLE 1.

## VITAL STATISTICS OF WHOLE DISTRICT DURING 1908 AND PREVIOUS YEARS.

Year.	Population estimated to middle of each year.	Births.		Total Deaths registered in the District.				Total Deaths in Public Institutions in the District.	Deaths of Non-residents registered in Public Institutions in the District.	Deaths of Residents registered in Public Institutions beyond the District.	Nett deaths at all ages belonging to the District.	
		Number.	Rate.*	Under 1 year of age.		At all ages.					Number.*	Rate.*
				Number.	Rate per 1,000 births registered.	Number.	Rate.*					
I	2	3	4	5	6	7	8	9	10	11	12	13
1898	41,000	954	22·8	130	139	494	12·05	53	30	—	464	11·31
1899	41,750	936	22·3	136	145	566	13·50	68	33	—	533	12·37
1890	42,500	892	20·9	108	121	501	11·78	80	45	—	456	10·72
1901	43,500	907	20·8	94	104	498	11·45	77	17	—	481	11·05
1902	44,250	907	20·5	101	111·3	541	12·23	81	21	—	520	11·75
1903	45,000	900	20·0	97	107·8	495	11·0	84	22	—	473	10·51
1904	45,750	963	21·05	89	92·4	480	10·49	72	16	—	464	10·14
1905	46,500	853	18·34	87	101·9	496	11·22	97	26	—	496	10·69
1906	49,000	892	18·2	79	88·5	524	10·69	107	31	—	493	10·00
1907	50,500	871	17·25	92	105·6	555	10·99	104	26	—	509	10·47
Averages for years 1898-1907.	44,975	904·5	20·21	101·3	111·6	515	11·59	82	26	—	489	10·91
1908	51,500	951	18·46	83	87·2	510	9·90	98	27	10	493	9·57

\* Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.

TABLE II.

## Vital Statistics of separate Localities in 1908 and previous years.

Names of Localities.	1.—WHOLE DISTRICT.				2.—EAST WARD.				3.—CENTRAL WARD.				4.—WEST WARD.				5.—ST. MARY'S WARD.			
Year.	Population esti- mated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births registered.	Deaths at all Ages.	Deaths under 1 year.
1898 ...	41,000	934	494	130	15,248	506	200	72	10,860	161	98	22	6,367	41	41	5	8,525	226	155	31
1899 ...	41,750	936	566	136	15,640	517	229	78	10,885	158	107	20	6,443	35	41	—	8,782	226	189	38
1900 ...	42,500	892	501	108	16,033	510	195	61	10,980	146	100	22	6,519	29	44	2	9,038	207	162	23
1901 ...	43,500	907	498	94	16,488	498	178	61	10,997	164	111	13	6,657	26	49	2	9,388	219	160	18
1902 ...	44,250	907	541	101	17,424	541	246	66	9,738	121	115	15	6,146	40	49	4	10,942	205	110	16
1903 ...	45,000	900	495	97	17,834	563	229	59	9,748	111	89	10	6,206	29	46	4	11,212	197	131	24
1904 ...	45,750	963	480	89	18,357	581	209	59	9,773	120	95	6	6,227	35	39	3	11,393	227	121	21
1905 ...	46,500	853	496	87	18,601	499	216	59	9,829	94	109	10	6,367	35	58	3	11,703	225	113	15
1906 ...	49,000	892	524	79	19,556	525	234	55	9,925	115	92	7	6,861	28	43	2	12,658	224	124	15
1907 ...	50,500	871	555	92	20,512	556	251	61	9,997	103	117	6	6,641	32	35	3	13,350	180	126	22
Averages of years 1898 to 1907	44,975	904.5	515	101.3	17,569	530	219	63	10,272	129	103	13	6,442	33	44	2.8	10,699	214	139	22
1908 ...	51,500	951	510	83	20,828	585	233	59	10,027	110	95	6	6,762	29	32	3	13,883	227	123	11

There were Twenty-seven Deaths of Non-Residents in Institutions.

TABLE III.

Cases of Infectious Disease notified during the year 1908.

Notifiable Diseases.	Cases notified in whole District.						Total cases notified in each locality.				No. of cases removed to Hospital from each locality.				
	At all ages.	At Ages—Years.					East Ward. 1	Centrl Ward 2	West Ward. 3	St. Mary's 4	East Ward. 1	Centrl Ward 2	West Ward. 3	St. Mary's 4	
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 65.									65 and upwards.
Small-pox .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Cholera .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	
Diphtheria (including Membranous Croup) .....	258	..	60	175	13	10	..	185	25	9	39	185	24	9	38
Erysipelas .....	28	..	..	5	13	10	..	18	3	2	5	..	..	..	..
Scarlet Fever .....	148	1	32	91	17	7	..	90	11	4	43	89	11	4	43
Typhus Fever .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Enteric Fever .....	7	..	..	3	1	3	..	1	2	3	1	1	1	3	..
Relapsing Fever .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Continued Fever .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Puerperal Fever .....	1	..	..	..	..	1	..	..	1	..	..	..	..	..	..
Plague .....	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Totals .....	442	1	92	274	31	34	10	294	42	18	88	275	36	16	81

**TABLE IV.**  
**Weekly Notifications of Infectious Diseases, 1908.**

Week.		Small-pox.	Diphtheria.	Erysipelas.	Scarlet Fever.	Typhoid Fever.	Puerperal Fever.	Totals.
No.	Date of Ending.							
1	January 4...	...	...	...	1	...	...	1
2	" 11...	...	6	1	3	...	...	10
3	" 18...	...	5	1	1	...	...	7
4	" 25...	...	4	2	4	...	...	10
5	February 1...	...	10	1	1	...	...	11
6	" 8...	...	5	...	6	...	...	11
7	" 15...	...	9	1	1	...	...	11
8	" 22...	...	5	...	2	...	1	8
9	" 29...	...	3	...	...	...	...	3
10	March 7...	...	4	...	1	...	...	5
11	" 14...	...	5	...	2	...	...	7
12	" 21...	...	1	1	3	...	...	5
13	" 28...	...	3	...	2	1	...	6
14	April 4...	...	3	1	5	...	...	9
15	" 11...	...	3	4	1	...	...	8
16	" 18...	...	3	2	1	...	...	6
17	" 25...	...	...	...	1	...	...	1
18	May 2...	...	3	1	5	...	...	9
19	" 9...	...	4	...	1	...	...	5
20	" 16...	...	2	1	2	...	...	5
21	" 23...	...	1	...	2	...	...	3
22	" 30...	...	4	...	9	...	...	13
23	June 6...	...	4	...	6	...	...	10
24	" 13...	...	...	1	3	...	...	4
25	" 20...	...	3	...	2	...	...	5
26	" 27...	...	2	2	1	...	...	5
27	July 4...	...	8	...	2	...	...	10
28	" 11...	...	5	...	2	1	...	8
29	" 18...	...	6	...	3	...	...	9
30	" 25...	...	3	...	6	...	...	9
31	August 1...	...	4	...	3	...	...	7
32	" 8...	...	7	...	5	...	...	12
33	" 15...	...	3	...	1	...	...	4
34	" 22...	...	4	...	1	1	...	6
35	" 29...	...	1	...	1	...	...	2
36	September 5...	...	2	2	...	...	...	4
37	" 12...	...	1	...	...	...	...	1
38	" 19...	...	1	...	1	...	...	2
39	" 26...	...	6	...	3	...	...	9
40	October 3...	...	5	1	3	...	...	9
41	" 10...	...	6	...	1	1	...	8
42	" 17...	...	5	...	4	1	...	10
43	" 24...	...	8	1	2	...	...	11
44	" 31...	...	9	1	2	1	...	13
45	November 7...	...	10	3	4	...	...	17
46	" 14...	...	10	...	5	...	...	15
47	" 21...	...	10	...	3	...	...	13
48	" 28...	...	6	1	11	...	...	18
49	December 5...	...	10	...	7	...	...	17
50	" 12...	...	15	1	3	...	...	19
51	" 19...	...	7	...	6	...	...	13
52	" 26...	...	9	...	3	1	...	13
	After December 26	...	5	...	...	...	...	5
Totals ...		...	258	28	148	7	1	442

TABLE V.  
Notifications of Infectious Disease. Returns for 1904—1908.

YEAR.	1904.				1905.				1906.				1907.				1908.			
Quarter.	I	2	3	4	Year.	I	2	3	4	Year.	I	2	3	4	Year.	I	2	3	4	Year.
Diphtheria.....	12	4	8	14	38	5	10	10	6	31	5	5	4	5	19	63	33	52	110	258
Scarlet Fever.....	9	13	4	38	64	3	12	8	46	69	54	29	20	45	148	23	32	24	55	134
Enteric Fever .....	3	2	1	2	8	...	...	4	1	5	...	2	4	2	8	1	...	...	...	1
Puerperal Fever ...	2	...	1	1	4	...	2	...	...	2	...	...	...	...	1	1	...	...	...	2
Erysipelas .....	6	2	5	10	23	12	9	5	9	35	8	13	5	6	32	12	4	7	4	27
Membranous Group	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Small Pox .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Total .....	32	21	19	65	137	20	33	27	62	142	67	50	33	58	208	41	40	38	99	218
																101	82	87	172	442

Sickness-rate for 1898 (estimated population, 41,000)—3.46.  
 " " 1899 " " 41,750)—3.76.  
 " " 1900 " " 42,500)—3.48.  
 " " 1901 " " 43,500)—4.74.  
 " " 1902 " " 44,250)—4.45.  
 " " 1903 " " 45,000)—2.62.  
 Sickness-rate for 1904 (estimated population, 45,750)—2.99.  
 " " 1905 " " 46,500)—3.05.  
 " " 1906 " " 49,000)—4.24.  
 " " 1907 " " 50,500)—4.31.  
 " " 1908 " " 51,500)—8.5.

TABLE VI.

Table shewing the number of Deaths from the seven principal Zymotic Diseases in the 10 years 1898—1907 and in the year 1908.

Disease.	1898	1899	1900	1901	1902	1903	1904	1905	1906	1907	Decennial Average.	1908.	
												Deaths.	Death-rates.
Small-Pox	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles	20	7	...	...	19	...	1	5	10	1	6.3	...	...
Scarlet Fever	1	1	...	...	1	...	1	1	...	1	0.6	...	...
Whooping Cough	2	23	4	9	2	26	5	9	...	5	8.5	3	0.058
Diphtheria	11	9	3	3	3	2	2	2	2	3	4.0	14	0.27
Enteric Fever	4	4	4	3	1	3	...	1	...	...	2.0	3	0.058
Diarrhoea	46	52	23	29	7	5	15	2	9	8	19.6	16	0.31
Totals	84	96	34	44	33	36	24	20	21	18	41.0	36	0.69
Zymotic Death-rate per 1,000 population	1.85	2.04	0.69	1.01	0.75	1.07	0.52	0.40	0.43	0.35	0.91	0.69	...

TABLE VII.  
Estimated Population, 51,500.

1908.		1st Quarter	2nd Quarter	3rd Quarter	4th Quarter.	Year.
BIRTHS.	Males .. .. .	122	142	120	123	507
	Females .. .. .	134	110	114	86	444
	Total .. .. .	256	252	234	209	951
	Equivalent annual rate per 1,000 persons	19'88	19'57	18'17	16'23	18'46
	East District .. .. .	162	162	144	117	585
	Central District .. .. .	23	23	29	35	110
	West District .. .. .	8	10	5	6	29
	St. Mary's District .. .. .	63	57	56	51	227
NOTIFICATIONS.	Diphtheria .. .. .	63	33	52	110	258
	Erysipelas .. .. .	7	11	3	7	28
	Scarlet Fever .. .. .	29	38	30	51	148
	Enteric Fever .. .. .	1	—	2	4	7
	Puerperal Fever .. .. .	1	—	—	—	1
	Total .. .. .	101	82	87	172	442
	Sickness-rate per 1,000, per annum	7'84	6'36	6'75	13'35	8'58
DEATHS.	Males .. .. .	65	72	63	62	262
	Females .. .. .	78	54	52	64	248
	Total .. .. .	143	126	115	126	510
	Non-Residents .. .. .	15	9	13	14	51
	Corrected Total .. .. .	128	117	102	112	459
	Both Sexes { Under 1 year .. .. .	17	16	21	29	82
	{ 1-5 years .. .. .	6	3	5	11	25
	{ 5-15 years .. .. .	2	2	7	1	12
	{ 15-65 years .. .. .	54	50	40	53	197
	{ Over 65 years .. .. .	64	55	42	32	193
	Equivalent annual rate per 1,000 persons	11'10	9'78	8'93	9'78	9'90
	Death-rate, excluding deaths of visitors ..	9'94	9'08	7'92	8'69	8'91
	Deaths under 1 year per 1,000 births ..	66	63	89	138	87'2
	East District .. .. .	61	55	55	55	226
	Central District .. .. .	29	25	16	15	85
CAUSES OF DEATH, &c.	West District .. .. .	5	5	7	14	31
	St. Mary's District .. .. .	33	32	24	23	117
	Visitors .. .. .	15	9	13	14	51
	Zymotic Diseases—					
	Seven principal Zymotic Diseases ..	4	2	13	13	32
	Other Zymotic Diseases .. .. .	12	7	2	6	27
	Dietic Diseases .. .. .	2	—	—	2	4
	Constitutional Diseases { Pulmonary Tuberculosis ..	9	13	7	13	42
	{ Other Tubercular Diseases ..	4	2	3	2	11
	{ Malignant Diseases .. .. .	14	10	13	10	47
	{ Rheumatism and Gout .. .. .	—	1	—	1	2
	Other Constitutional Diseases ..	3	9	7	8	27
	Premature Birth .. .. .	5	6	4	7	22
	Old Age .. .. .	14	7	5	7	33
	Local Diseases { Apoplexy .. .. .	2	1	1	2	6
	{ Convulsions .. .. .	—	1	—	1	2
	{ Other Nervous Diseases ..	5	5	3	4	17
	{ Diseases of Circulatory System ..	28	26	24	21	99
	{ " Respiratory " .. .. .	14	13	6	9	42
	{ " Digestive " .. .. .	16	8	6	6	36
	{ " Urinary " .. .. .	1	9	9	4	23
	{ " Reproductive " .. .. .	2	—	—	1	3
	Other Local Diseases .. .. .	1	1	—	1	3
	Accident, Violence and Negligence ..	3	4	8	5	20
	Ill-defined Causes .. .. .	1	1	1	2	5
	Not Certified .. .. .	3	—	3	1	7
	Inquests held .. .. .	9	3	16	6	34
	Deaths in Institutions .. .. .	—	—	—	—	98
METEOROLOGY.	Atmospheric Pressure, { Mean .. .. .	30'045	30'013	30'012	30'049	30'029
	{ Highest .. .. .	30'737	30'515	30'417	30'477	30'737
	{ Lowest .. .. .	28'991	29'402	29'358	28'695	28'695
	Air Temperature { Mean .. .. .	40'7	52'6	60'1	50	50'8
	{ Highest .. .. .	51'2	78'8	75'5	72'4	78'8
	{ Lowest .. .. .	22'0	33'5	39	16'7	16'7
	Earth Temperature .. .. .	42'2	52'3	60'7	52'7	51'9
	Sea " .. .. .	41'1	52'4	61'9	51'6	51'7
	Total Rainfall (inches) .. .. .	5'96	5'09	8'45	6'23	25'73
	Bright Sunshine (hours recorded) ..	316'1	674'3	650'1	289'6	1930'1
	Wind (prevailing direction) .. .. .	W.	N.E.	S.W.	N.E.	N.E.

TABLE VIII.  
Causes of, and Ages at Death during Year 1908.

Causes of Death.	Deaths at the subjoined ages of "Residents," whether occurring in or beyond the district.							Deaths of all ages of "Residents" belonging to Localities, whether occurring in or beyond the District.				Total deaths whether of Residents or non-"Residents" in Public Institutions in the District.
	All ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	East District.	Central District.	West District.	St. Mary's District.	
I	2	3	4	5	6	7	8	9	10	11	12	13
Whooping-Cough	3	...	1	...	...	...	...	3	...	...	...	...
Diphtheria and Membranous Croup	14	...	8	5	...	1	...	10	3	...	1	13
Epidemic Influenza	13	...	...	...	1	3	9	3	4	1	4	1
Diarrhoea	16	14	2	...	...	...	...	14	...	...	...	3
Enteritis	3	3	...	...	...	...	...	3	...	...	...	...
Enteric Fever	3	...	...	...	1	2	...	1	1	...	...	3
Puerperal Fever	1	...	...	...	...	1	...	...	1	...	...	...
Phthisis (Pulmonary Tuberculosis)	42	...	...	...	3	35	4	17	8	3	14	8
Other Tubercular Diseases	11	2	1	1	7	...	...	5	...	1	4	1
Cancer, Malignant Disease	48	1	...	...	...	20	27	19	9	4	13	12
Bronchitis...	16	3	2	1	...	...	10	10	1	1	4	2
Pneumonia	23	10	...	...	2	6	5	16	2	1	4	3
Pleurisy	2	...	...	...	...	2	...	1	...	...	1	...
Other Diseases of Respiratory Organs	4	...	...	...	...	3	1	3	...	1	...	...
Alcoholism, Cirrhosis of Liver	6	...	...	...	...	4	2	3	1	...	1	2
Premature Birth	22	22	...	...	...	...	...	10	5	1	6	...
Heart Diseases	54	...	1	...	...	15	38	18	13	5	16	5
Accidents	10	1	1	...	...	4	4	3	3	...	2	1
Suicides	7	...	...	...	1	4	2	2	2	1	2	...
Total of above	298	58	16	7	15	100	102	141	53	19	72	54
All other causes	212	25	9	3	3	69	103	92	42	13	51	44
All causes	510	83	25	10	18	169	205	233	95	32	123	98

Twenty-seven Non-Residents died in institutions; these deaths are included in the 510, but are not ascribed to any particular district.  
The deaths in institutions of Residents are ascribed to the districts from whence they came.



TABLE IX.

## INFANTILE MORTALITY DURING THE YEAR 1908.

Deaths from stated Causes in Weeks and Months under One Year of Age.

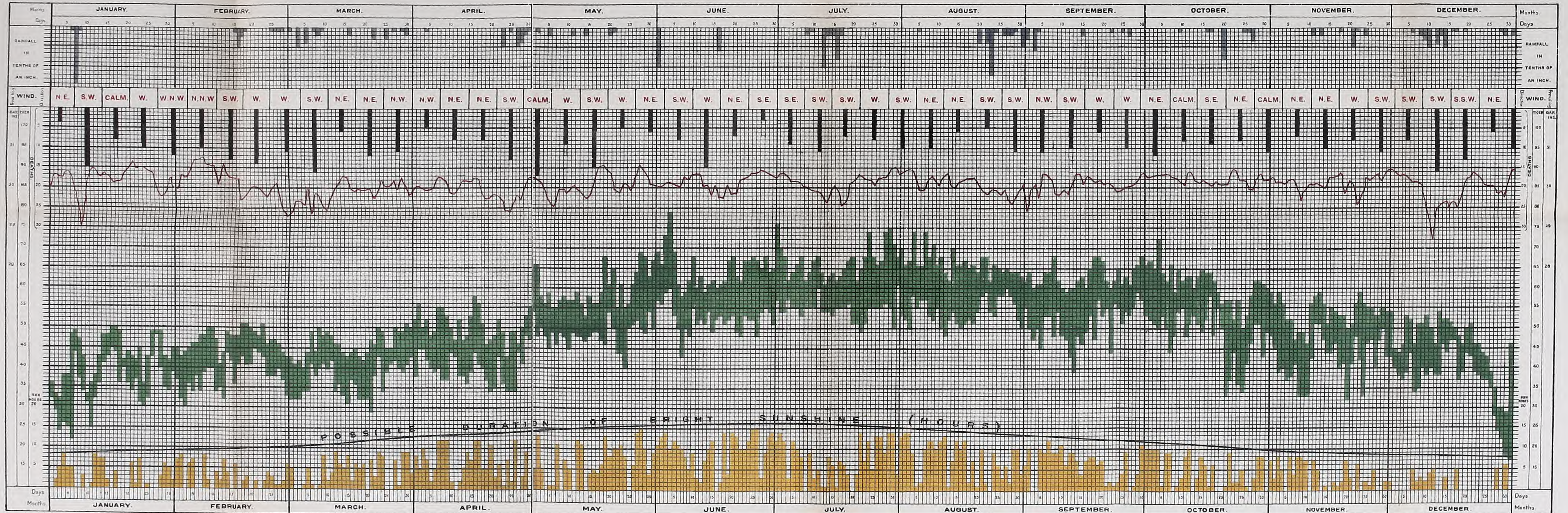
CAUSE OF DEATH.	Under 1 week.	1-2 weeks.	2-3 weeks.	3-4 weeks.	Total under 1 month.	1-2 months.	2-3 months.	3-4 months.	4-5 months.	5-6 months.	6-7 months.	7-8 months.	8-9 months.	9-10 months.	10-11 months.	11-12 months.	Total Deaths under 1 Year.
ALL CAUSES—																	
Certified ...	27	2	2	...	31	10	7	4	5	4	7	2	5	4	2	2	83
Uncertified ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Common Infectious Diseases—																	
Whooping Cough ...	...	...	...	...	...	1	...	...	...	...	...	...	1	...	...	...	2
Diarrhoeal Diseases—																	
Diarrhoea, all forms ...	...	...	...	...	...	4	1	2	4	...	...	1	...	...	1	1	14
Enteritis, Muco-enteritis, Gastro-enteritis,...	...	...	...	...	...	...	...	...	...	...	1	...	1	1	...	...	3
Wasting Diseases—																	
Premature Birth...	18	1	...	...	19	2	1	...	...	...	...	...	...	...	...	...	22
Congenital Defects ...	2	...	...	...	2	1	1	...	...	...	1	...	...	...	...	...	5
Want of Breast-milk, Starvation	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1
Atrophy, Debility, Marasmus...	3	1	2	...	6	1	2	...	...	1	...	...	...	...	...	...	10
Tuberculous Diseases—																	
Tuberculous Meningitis ...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
Tuberculous Peritonitis: Tabes Mesenterica ...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1
Other causes—																	
Bronchitis ...	1	...	...	...	1	...	...	...	...	...	2	...	1	1	...	...	5
Pneumonia ...	1	...	...	...	1	...	...	2	...	2	1	1	...	1	1	1	10
Suffocation, overlying ...	...	...	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1
Other Causes ...	2	...	...	...	2	...	...	...	...	1	2	...	2	1	...	...	8
	27	2	2	...	31	10	7	4	5	4	7	2	5	4	2	2	83





# Borough of Eastbourne.

Chart shewing the principal Meteorological Conditions during each day of the year 1908.  
(from weekly returns.)



V. T. SUMFIELD, LITHO, EASTBOURNE.

DEATHS. ————  
EACH SQUARE EQUALS ONE DEATH IN THE WEEK.

RAINFALL. ————  
EACH SQUARE EQUALS ONE-TENTH OF AN INCH.

BAROMETRIC PRESSURE (reduced to 32° F. and Sea Level). ————

TEMPERATURE (Maximum and Minimum). ————  
EACH SQUARE EQUALS ONE DEGREE.

SUNSHINE. ————  
EACH SQUARE EQUALS ONE HOUR.

